

# **I. ADMINISTRATION AND MANAGEMENT**

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# I. ADMINISTRATION AND MANAGEMENT

## I.1 LEGAL COMPLIANCE\*

### I.1.01 The EAP complies with all applicable federal, state or provincial, and local laws and regulations.

#### Evidence of Compliance (I.1.01)

##### PRE-SITE

Provide relevant material regarding licensing and other legal requirements and provide a narrative that describes coverage of applicable laws and methods of compliance.

##### ON-SITE

The team will interview the chief executive officer or his/her designee.

### I.1.02 The EAP does not possess any outstanding work orders, notices of violation, or negative directives from any governmental or quasi-regulatory body.

#### Evidence of Compliance (I.1.02)

##### PRE-SITE

Provide a description of any pending corrective actions, as applicable.

##### ON-SITE

The team will interview the chief executive officer or his/her designee.

### I.1.03 The EAP complies with all self-reporting requirements associated with licensure, accreditation, and/or other appropriate external review bodies.

#### Evidence of Compliance (I.1.03)

##### PRE-SITE

Provide a list of all applicable licensures, accreditations, and external reviews.

##### ON-SITE

The team will review documents that demonstrate compliance with self-reporting.

## I.2 LEGAL STRUCTURE

- I.2.01 The external EAP or the internal EAP's host organization is legally authorized to operate as one of the following:
- a. a for-profit organization that is organized as a corporation, partnership, sole proprietorship, or association, and has a duly promulgated charter, articles of incorporation, partnership agreement, articles of association, constitution, and/or bylaws;
  - b. a not-for-profit organization that is organized as an identified sub-unit of another legal entity recognized under state or provincial law; or
  - c. a not-for-profit organization that is incorporated in the state or province in which it operates or is headquartered, and has a duly promulgated charter, constitution, and/or bylaws with its own board of directors.

### **Evidence of Compliance (I.2.01)**

#### PRE-SITE

Provide documents of incorporation, partnership, or association, or other documents authorizing the EAP or host organization to operate.

- I.2.02            The EAP’s charter or constitution provides that disposition of assets upon dissolution of the corporation shall be in keeping with the purpose of the EAP and comply with applicable legal and contractual requirements.**

### **Evidence of Compliance (I.2.02)**

#### PRE-SITE

Provide appropriate sections of the charter or constitution that contain the dissolution clause and address the disposition of assets.

NA                The EAP is internal.

## **I.3                ORGANIZATION OF THE BOARD OF DIRECTORS**

### ***Interpretation (I.3):***

*Please note that a board of directors/trustees acts as the governing body or “owners” of a not-for-profit EAP. In a for-profit EAP, the governing body or “owners” are the EAP’s shareholders. Please apply the appropriate perspective when completing these standards.*

- I.3.01            The EAP maintains one or more bodies, such as a board of directors/trustees, or advisory board, that regularly advise the EAP on its policies, management, planning, finances, use of resources, and service delivery.**

### ***Interpretation (I.3.01):***

*Most privately-held for-profit organizations demonstrate compliance with this standard by establishing an advisory board. Not-for-profit or publicly traded for-profit organizations will often demonstrate compliance through a board of directors/trustees.*

### **Evidence of Compliance (I.3.01)**

#### PRE-SITE

Provide relevant sections from bylaws or other documentation that address the standard.

#### ON-SITE

The team will interview the chair and one or more representatives of the board of directors and/or advisory board, if applicable. Board of directors or advisory board meeting minutes will be reviewed to examine the type of advice the EAP seeks.

- I.3.02            The board of directors is sufficient in size and structure to:**
- a. engage in long-term planning;**
  - b. develop and adopt policy;**
  - c. develop resources; and**
  - d. provide financial oversight.**

### ***Interpretation (I.3.02):***

*A large organization is likely to have an elaborate committee or task force structure to accomplish these goals, whereas a small organization may not require such a framework. As long as the EAP can*

*demonstrate that the board of directors carries out its responsibilities effectively and thoroughly through regular meetings and clear responsibilities, compliance will be achieved.*

### **Evidence of Compliance (I.3.02)**

#### **PRE-SITE**

Provide a list of standing committees and/or task forces providing oversight of these board functions. If more than ten such task forces exist, list only those that address issues of highest priority, including those listed in the standard. The team will review the Board Questionnaires.

#### **ON-SITE**

The team will interview members of the board of directors.

**NA** The EAP is a privately held for-profit organization.

- I.3.03** **The bylaws, constitution, or similar legal document of the publicly traded or not-for-profit EAP is reviewed every four years and establishes:**
- a. the structure, size, and responsibilities of the board of directors;**
  - b. the minimum number of board of directors' meetings and quorum requirements;**
  - c. the body to which the board of directors delegates interim authority; and**
  - d. a process for assessing and implementing board responsibilities, such as establishing task forces/committees, and respective responsibilities and composition.**

### **Evidence of Compliance (I.3.03)**

#### **PRE-SITE**

Provide the appropriate sections of the constitution, bylaws, or other legal documents regarding the structure and functions of the board of directors.

**NA** The EAP is a privately held for-profit corporation.

- I.3.04** **The documents listed in I.3.03 also set forth the:**
- a. eligibility requirements for board of directors membership;**
  - b. mechanisms for recruitment, selection, rotation, and duration of board of directors membership; and**
  - c. mechanisms for election of officers and the duration of officer terms.**

### **Evidence of Compliance (I.3.04)**

#### **PRE-SITE**

The team will review the appropriate section of the constitution, bylaws, or other legal documents regarding the structure of the board of directors.

**NA** The EAP is a privately held for-profit corporation.

- I.3.05** **All members of the EAP's board of directors:**
- a. receive an orientation to the responsibilities of membership;**
  - b. receive a manual with current, relevant organizational material that specifies their fiduciary and other responsibilities to the EAP;**
  - c. receive a formal orientation to the EAP's mission, history, goals, objectives, structure, methods of operation, and introductions to key staff; and**
  - d. are familiarized with the activities of the organization through a visit to the EAP.**

**Interpretation (I.3.05):**

*“Relevant organizational materials” noted in (b) include, but are not limited to, bylaws, mission statement, and relevant policies and procedures.*

**Evidence of Compliance (I.3.05)**

**PRE-SITE**

The team will review the Board Questionnaires.

**ON-SITE**

The team will review a copy of the board of directors’ manual, as well as outlines, agendas, and dates of board of directors’ orientation sessions and will interview members of the board of directors.

**NA** The EAP is a privately held for-profit corporation.

**I.4 OWNERS/SENIOR MANAGEMENT OR BOARD OF DIRECTORS’ RESPONSIBILITIES\***

**I.4.01 The owners/senior management or board of directors assumes responsibility for setting the EAP’s long-term direction.**

**Evidence of Compliance (I.4.01)**

**PRE-SITE**

The team will review the Board Questionnaires.

**ON-SITE**

The team will interview the owners/senior management or members of the board of directors and review minutes where the EAP’s long-term plan was ratified.

**I.4.02 In fulfilling its oversight responsibilities, the owners/senior management or board of directors:**

- a. ensures that all planned or provided services are consistent with the EAP’s mission and long-term plan; and**
- b. determines whether services are within the EAP’s capabilities and resources.**

**Interpretation (I.4.02):**

*The owners/senior management or board of directors’ effectiveness in these oversight responsibilities is directly linked to the EAP’s quality improvement processes and long-term planning described in VII. Quality Improvement.*

**Evidence of Compliance (I.4.02)**

**PRE-SITE**

Provide procedures on, or minutes demonstrating, governing body oversight responsibilities.

**ON-SITE**

The team will interview governing body members.

**I.4.03 The board of directors assumes responsibility for policy development and maintenance by:**

- a. adopting policies;**
- b. reviewing policies at specified intervals and whenever legal requirements or regulations change; and**
- c. approving any changes to policies resulting from recommendations or negotiation with a recognized collective bargaining unit.**

**Interpretation (I.4.03):**

*An organization that follows a policy governance model may not typically develop, ratify, and maintain statements known as “policies.” However, statements that are distillations of organizational principles, philosophies, practice, or “ends” may be considered policies for the purposes of this standard.*

*The standard requires that the board of directors actively exercises its policy-setting prerogative, i.e., policies are periodically reviewed as a whole, and specific policy matters regularly receive the board of directors’ attention. The board of directors must view policy as the board of directors’ major means of providing a framework and guidance for the EAP’s overall direction.*

**Evidence of Compliance (I.4.03)**

**PRE-SITE**

Provide relevant sections of the articles of incorporation, constitution, or bylaws regarding the responsibilities of the board of directors. The team will review the Board Questionnaires.

**ON-SITE**

The team will interview board of directors members and review minutes for documentation of policy decisions.

**I.4.04            The EAP maintains a comprehensive policies and procedures manual that includes owners- or board of directors-approved policy statements.**

**Interpretation (I.4.04):**

*In an internal EAP, the policies and procedures manual may be part of the organization-wide policies and procedures manual.*

**Evidence of Compliance (I.4.04)**

**PRE-SITE**

Provide the table of contents for the policies and procedures manual.

**ON-SITE**

The team will review the policies and procedures manual.

**I.4.05            The EAP’s owners/senior management or board of directors’ fiscal responsibilities include:**

- a. reviewing and approving the EAP’s annual budget;**
- b. reviewing fiscal summaries at least quarterly to examine the relationship of the budget to actual expenditures and revenues;**
- c. examining fiscal policy and the recommendations of the EAP’s auditors; and**
- d. annually evaluating the chief executive officer or equivalent’s management of the EAP’s fiscal affairs.**

**Interpretation (I.4.05):**

*In an internal EAP, the activities described in this standard may occur as part of organization-wide management and/or board functioning.*

**Evidence of Compliance (I.4.05)**

**PRE-SITE**

Provide sections of the EAP’s bylaws, constitution, or other documents regarding the fiscal responsibilities of the owners/senior management or board of directors. The team will review the Board Questionnaires.

**ON-SITE**

The team will review the minutes of appropriate financial task force/committee meetings and will interview

the chairperson of the financial oversight task force/committee.

**I.4.06            The board of directors and/or advisory board maintains up-to-date minutes and records generated from all meetings.**

***Interpretation (I.4.06):***

*In EAPs with both a board of directors and an advisory board, gaps or lapses in advisory board records will not jeopardize the EAP's compliance.*

**Evidence of Compliance (I.4.06)**

ON-SITE

The team will review the minutes and records from the last three meetings.

**I.5                    OWNERS/SENIOR MANAGEMENT OR BOARD OF DIRECTORS' RISK MANAGEMENT RESPONSIBILITIES\***

**I.5.01            The EAP reports to the board of directors or its designated authority on the nature of risks and actions taken to address them.**

**Evidence of Compliance (I.5.01)**

PRE-SITE

Provide management procedures and other related material about risk management practices. The team will review the Board Questionnaires.

ON-SITE

The team will review the board of directors' minutes regarding actions taken relative to risk management.

**I.5.02            The owners/senior management or board of directors reviews patterns of complaints and grievances and addresses specific problematic or unresolved issues that may expose the EAP to liability.**

**Evidence of Compliance (I.5.02)**

PRE-SITE

The team will review the Board Questionnaires.

ON-SITE

The team will review relevant board of directors' or committee minutes and records of grievances, and will interview board of directors members and/or owners/senior management.

**I.5.03            The owners/senior management or board of directors ensures that the EAP complies with all laws related to fiscal accountability and governance.**

**Evidence of Compliance (I.5.03)**

PRE-SITE

Provide a description of the mechanisms the EAP uses to ensure compliance with laws related to fiscal accountability and governance.

ON-SITE

The team will interview owners/senior management or members of the board of directors regarding state- or province-specific reporting requirements for review of bylaws, registration of incorporation, and other issues. The team will review tax forms.

## **I.6 BOARD OF DIRECTORS' RESPONSIBILITIES RELATED TO THE CHIEF EXECUTIVE OFFICER\***

**NA** The EAP is internal or a privately-held for-profit organization.

- I.6.01 The board of directors:**
- a. appoints a chief executive officer and delegates authority and responsibility for the EAP's management and implementation of policy; and**
  - b. holds the chief executive officer accountable for the EAP's performance.**

### **Evidence of Compliance (I.6.01)**

#### **PRE-SITE**

Provide sections of policies and procedures, and/or bylaws, constitution, or other documents regarding appointment, authority, responsibility, and accountability of the chief executive officer.

#### **ON-SITE**

The team will interview the chief executive officer and members of the board of directors.

- I.6.02 The EAP's board of directors:**
- a. evaluates the chief executive officer's performance in writing at least annually against established performance criteria that are linked to the EAP's long-term plan; and**
  - b. ensures that the chief executive officer participates in the evaluation process and reviews, signs, and responds to the evaluation before it is entered into his/her record.**

### **Evidence of Compliance (I.6.02)**

#### **PRE-SITE**

Provide sections of the EAP's bylaws, constitution, or other documents regarding appointment, authority, responsibility, and accountability of the chief executive officer. The team will review the Board Questionnaires.

#### **ON-SITE**

The team will interview the chief executive officer and members of the board of directors.

- I.6.03 The EAP's board of directors reviews the fairness of the chief executive officer's compensation and benefits on an annual basis in relationship to industry practices and federal law.**

### **Evidence of Compliance (I.6.03)**

#### **ON-SITE**

The team will review the board of directors' analysis of the chief executive officer's compensation.

**NA** The organization is a for-profit organization.

- I.6.04 In the absence of the chief executive officer, the EAP's board of directors:**
- a. has a written plan for delegating authority;**
  - b. designates an interim chief executive officer, if necessary;**
  - c. charges a committee with responsibility for conducting a formal search, where necessary; and**
  - d. provides the resources needed to carry out the search effectively.**

#### **Evidence of Compliance (I.6.04)**

PRE-SITE

Provide the section of the EAP's bylaws and/or policy and procedures regarding replacement of the chief executive officer and delegation of authority in the absence of the chief executive officer.

ON-SITE

The team will interview members of the board of directors.

### **I.7 CHIEF EXECUTIVE OFFICER\*\***

#### ***Interpretation (I.7):***

*In a large organization, the chief executive officer's functions, as described in these standards, may be assumed in part by a designee of the chief executive officer, such as an administrator, director, or president.*

NA The EAP is internal.

#### **I.7.01 The chief executive officer or his/her designee:**

- a. plans and coordinates the development of policies governing the EAP's services with the owners or board of directors; and**
- b. attends all meetings of the board of directors and advisory board, with the possible exception of those held for the purpose of reviewing the executive's performance, status, or compensation.**

#### ***Interpretation (I.7.01):***

*The chief executive officer or his/her designee involves, consults, and gives leadership to the board of directors in the planning, policy, and decision-making processes. The chief executive officer or his/her designee and board of directors work as an effective team: information, coordination, staffing, and assistance are provided by the executive to support the board of directors in its policy making and oversight functions.*

#### **Evidence of Compliance (I.7.01)**

PRE-SITE

Provide the chief executive officer or his/her designee's job description.

ON-SITE

The team will interview the owners/members of the board of directors and the chief executive officer or his/her designee.

- #### **I.7.02 The chief executive officer or his/her designee provides written, comprehensive reports to the board of directors according to a mutually agreed upon schedule regarding:**
- a. present financial status and anticipated problems;**
  - b. financial planning and funding alternatives;**
  - c. the operation of present programs, including areas of non-compliance with EAP policy;**
  - d. the implementation and annual review of long-term plans; and**
  - e. any other issues related to the EAP's achievement of its mission.**

#### ***Interpretation (I.7.02):***

*Such reports must be provided at least annually. Reports must be responsive to the board of directors' need for information upon which to base decisions about short-term financial and budgetary matters, and*

*to plan for the near term.*

**Evidence of Compliance (I.7.02)**

PRE-SITE

The team will review the Board Questionnaires.

ON-SITE

The team will interview the chief executive officer or his/her designee, or members of the board of directors and review the most recent reports. The EAP may provide a procedure in lieu of (a) and (b), but must provide a report related to the elements of (c), (d), and (e). The team will review the Board Questionnaires.

- I.7.03            The chief executive officer or his/her designee's primary responsibility is management of the EAP and s/he:**
- a. obtains board of directors' approval for employment activities outside of the EAP; and**
  - b. assumes no duties that are unrelated to and/or interfere with his/her management responsibilities.**

**Evidence of Compliance (I.7.03)**

PRE-SITE

Provide the chief executive officer or his/her designee's job description.

ON-SITE

The team will interview members of the board of directors and the chief executive officer or his/her designee.

- I.7.04            The chief executive officer or his/her designee reviews policies and procedures annually for their continued applicability.**

**Evidence of Compliance (I.7.04)**

ON-SITE

The team will interview the chief executive officer or his/her designee.

- I.7.05            The chief executive officer or his/her designee ensures that human resources management complies with federal and state or provincial employment law.**

**Evidence of Compliance (I.7.05)**

PRE-SITE

Provide a description of the EAP's efforts to comply with federal and state or provincial employment laws, including the mechanisms the EAP uses to ensure compliance.

ON-SITE

The team will interview the chief executive officer or his/her designee.

**I.8                EAP POLICIES\***

- I.8.01            The EAP defines itself in its policy and promotional materials as either an internal, external, or internal/external EAP.**

**Evidence of Compliance (I.8.01)**

PRE-SITE

Provide a sample of policy and promotional materials.

**I.8.02            The internal EAP operates as a distinct service within the host organization.**

**Evidence of Compliance (I.8.02)**

PRE-SITE

Provide the policy and/or relevant materials.

NA                The EAP is not internal.

**I.8.03            EAP policy establishes that its service delivery is tailored to the needs and requests of its customer organizations as set forth in its contracts with the customers.**

**Evidence of Compliance (I.8.03)**

PRE-SITE

Provide the required policy and/or relevant contract.

NA                The EAP is internal.

**I.8.04            EAP policy sets forth its relationship with any managed behavioral healthcare companies that provide services to the host or customer organization.**

**Evidence of Compliance (I.8.04)**

PRE-SITE

Provide the required policy.

NA                The EAP host or customer organization does not have relationships with managed behavioral healthcare companies.

**I.8.05            EAP policy establishes that it will not withdraw services prior to the number of sessions stated in its contract with the client, unless the client:**  
**a. requires longer term service and needs an immediate referral;**  
**b. does not wish or need to continue service; or**  
**c. is unable to continue service.**

**Evidence of Compliance (I.8.05)**

PRE-SITE

Provide the required policy.

**I.8.06            The EAP's policies, procedures, and practices prohibit discrimination in service delivery.**

***Interpretation (I.8.06):***

*In an internal EAP, the nondiscrimination policy may be part of the organization-wide policies and procedures manual.*

**Evidence of Compliance (I.8.06)**

PRE-SITE

Provide policies and procedures related to nondiscrimination. The team will review the Client Questionnaires and the Personnel Questionnaires.

ON-SITE

The team will interview staff, and clients when permissible.

## **I.9 EAP SERVICE DESIGN\***

- I.9.01 The EAP has a program description that includes:**
- a. an explanation of the kinds of services offered by the EAP, including the availability of emergency services;**
  - b. the kinds of referrals the EAP accepts and the referral process to the EAP;**
  - c. the nature and extent of preventive and health promotion activities to be undertaken through the EAP;**
  - d. the location of the EAP services; and**
  - e. ways to access EAP services.**

### **Evidence of Compliance (I.9.01)**

PRE-SITE

Provide the program description.

- I.9.02 The program description also includes:**
- a. a clear description of any mandated disclosures;**
  - b. a statement verifying that the EAP adheres to all legal requirements; and**
  - c. a statement maintaining the EAP's neutrality with the host or customer organization with respect to employee/employer relations.**

### **Evidence of Compliance (I.9.02)**

PRE-SITE

The team will review the program description.

- I.9.03 The EAP service is designed to:**
- a. help organizations develop and maintain optimum work environments for their employees;**
  - b. help employees become more productive at work;**
  - c. help employees and eligible participants with relationship, family, addiction, legal, emotional, stress, work-life balance, and other personal problems;**
  - d. make referrals for individuals who have severe psychological problems and substance abuse disorders that require outpatient, partial, or residential treatment; and**
  - a. provide preventive strategies aimed at stimulating employee awareness and education to encourage early intervention.**

**Note:** As used in this standard, "addiction" addresses alcohol, drugs, gambling, sexual, internet, and other addictions or addictive behaviors.

### **Evidence of Compliance (I.9.03)**

PRE-SITE

Provide the mission statement, intake criteria, and a sample of contracts.

ON-SITE

The team will interview the chief executive officer or his/her designee.

- I.9.04 The EAP provides the following services:**
- a. assessment and referral;**
  - b. employee education and outreach;**
  - c. training for supervisors, managers, and human resource and union**

- representatives;**
- d. management/supervisory consultation;**
- e. an EAP referral network for obtaining needed services that are not provided under the contract and/or are not available at the EAP; and**
- f. follow-up on referrals.**

**Note:** If one or more elements of the standard are completely absent from EAP operations, then a rating of "4" must be assigned.

**Evidence of Compliance (I.9.04)**

**PRE-SITE**

Provide program descriptions or other relevant documentation.

**ON-SITE**

The team will interview the chief executive officer or his/her designee.

## **II. MANAGEMENT OF EAP HUMAN RESOURCES**

- II.1 Human Resources Planning, Organization, and Deployment
- II.2 Human Resources Practices\*\*
- II.3 Human Resources Policies\*
- II.4 Recruitment and Selection Practices\*
- II.5 Human Resources Assessment and Evaluation
- II.6 Accountability and Performance Review\*\*
- II.7 Affiliate Engagement\*\*

## II. MANAGEMENT OF EAP HUMAN RESOURCES

### II.1 HUMAN RESOURCES PLANNING, ORGANIZATION, AND DEPLOYMENT

- II.1.01 The EAP:**
- a. assesses the type and number of personnel required to accomplish its mission, goals, and objectives;
  - b. establishes goals for retention of personnel;
  - c. measures and evaluates the rate of personnel turnover against benchmarks established for each job category; and
  - d. takes prompt action to correct identified job retention and satisfaction problems.

#### **Evidence of Compliance (II.1.01)**

##### PRE-SITE

Provide sections of the long-term and short-term plans that document compliance with this standard. The team will review evidence provided for VII.1.03 (d).

##### ON-SITE

The team will interview human resources personnel.

- II.1.02 In determining and reviewing the size of staff member workloads, the EAP assesses:**
- a. the work and time required to accomplish assigned tasks and job responsibilities;
  - b. service volume, accounting for assessed level of needs of new and current clients and referrals; and
  - c. standards of best practice, where they exist.

#### **Evidence of Compliance (II.1.02)**

##### ON-SITE

The team will interview human resources personnel.

- II.1.03 The EAP retains sufficient numbers of qualified individuals to:**
- a. efficiently and effectively meet the demand for all services it provides; and
  - b. provide and coordinate the services that are within the EAP's scope and resources.

#### ***Interpretation (II.1.03):***

*These individuals include those available on a full-time, part-time, or contractual basis.*

#### **Evidence of Compliance (II.1.03)**

##### PRE-SITE

Provide the organizational chart, the Aggregate Job Category Form, and procedures or personnel planning processes that ensure efficient and timely response to service demands with qualified personnel.

##### ON-SITE

The team will review relevant portions of the minutes of the personnel committee or board of

directors/administrative meetings regarding the EAP's personnel planning process in relation to these standards.

## **II.2 HUMAN RESOURCES PRACTICES\*\***

**II.2.01 The EAP maintains an organizational chart that specifies all staff positions and, if applicable, the position of the EAP within the host organization.**

### **Evidence of Compliance (II.2.01)**

PRE-SITE

Provide a copy of the organizational chart.

**II.2.02 Personnel policies and procedures are outlined in a manual, handbook, or other document that is provided to all EAP staff and which covers, but is not limited to:**

- a. personnel practices;**
- b. working conditions (e.g., hours of operation, fire protocol);**
- c. training and development opportunities;**
- d. conditions and procedures regarding disciplinary actions;**
- e. insurance protections; and**
- f. expectations for staff conduct and performance.**

### **Evidence of Compliance (II.2.02)**

PRE-SITE

The team will review the Personnel Questionnaires.

ON-SITE

The team will review the personnel policies and procedures manual and interview staff.

**II.2.03 The human resources procedures manual also addresses the following:**

- a. benefits;**
- b. paid and unpaid leave, holidays, and other time off;**
- c. wage and promotion policies; and**
- d. work-life enhancement programs, if applicable.**

### **Evidence of Compliance (II.2.03)**

ON-SITE

The team will review the personnel policies and procedures manual, and interview staff.

**II.2.04 The EAP requires personnel to sign or initial a statement indicating that they have received and understand the policies and procedures contained in the manual.**

### **Evidence of Compliance (II.2.04)**

ON-SITE

The team will review completed statements and interview staff.

**II.2.05 The EAP maintains an individual personnel record for each staff member that includes:**

- a. a job description;**
- b. the staff member contract or letter of hire;**
- c. a resume;**
- d. a copy of current licenses;**

- e. malpractice insurance coverage;
- f. a signed confidentiality statement; and
- g. other appropriate documents.

**Evidence of Compliance (II.2.05)**

ON-SITE

The team will review a sample of personnel records.

**II.2.06            Staff have access to their own records and may review, add, and correct information contained in them, in accordance with applicable state or provincial law.**

**Evidence of Compliance (II.2.06)**

PRE-SITE

Provide the specific sections of the EAP’s policies and/or procedures regarding access to personnel records.

ON-SITE

The team will interview staff.

**II.2.07            EAP procedures address:**  
**a. the use of off-site staff members; and**  
**b. appropriate work environments used in relation to their job responsibilities.**

**Evidence of Compliance (II.2.07)**

PRE-SITE

Provide the required procedure.

ON-SITE

The team will interview off-site staff.

NA                The EAP does not use off-site staff members.

**II.3                HUMAN RESOURCES POLICIES\***

**II.3.01            The EAP’s personnel policies and procedures state that it will not discriminate against any person or categories of persons protected by applicable federal, state or provincial, and/or local laws.**

***Interpretation (II.3.01):***

*When recruitment and hiring criteria include consideration of specific protected characteristics, such as gender, religion, and national origin, the EAP should seek legal advice as to whether these characteristics are “bona fide occupational qualifications” that are relevant to the EAP’s normal operation. Specifically, such organizations that operate in the United States should seek legal advice regarding the applicability of sections 702 and 703 of Title VII of the Civil Rights Act.*

**Evidence of Compliance (II.3.01)**

PRE-SITE

Provide sections or pages of the personnel manual that relate to the requirements of this standard. The team will review evidence provided for VII.3.05.

ON-SITE

The team will review staff grievances.

**II.3.02 The EAP complies with applicable laws and regulations governing fair employment practices and contractual relationships.**

***Interpretation (II.3.02):***

*This standard applies to the EAP's employment practices and contracts, including its use of independent contractors and temporary staff members, and its compliance with collective bargaining agreements. The major federal laws in the United States that govern employer/employee relations include, but are not limited to: the Civil Rights Act of 1964 (as amended by the Equal Employment Opportunity Act of 1972 and the Civil Rights Act of 1991), the Fair Labor Standards Act, the Equal Pay Act, the Age Discrimination in Employment Act, the Americans with Disabilities Act, the Family and Medical Leave Act, the Occupational Safety and Health Act, the National Labor Relations Act, as well as the regulations implementing all of the above statutes, and Executive Order 11246. The major federal laws in Canada that govern employer/employee relations include, but are not limited to: all chapters of the Canada Labour Code, the Fair Wages and Hours of Labour Act, the Canadian Human Rights Act, the Employment Equity Act, the Employment Insurance Act, and implementing regulations for all of these statutes. Fair employment practices will be addressed for the laws of each EAP's country of operation.*

**Evidence of Compliance (II.3.02)**

**PRE-SITE**

Provide copies of attorney, administrative agency, or court opinions indicating that the EAP's personnel policies and practices are in compliance with applicable laws and regulations. If such opinions are not available, provide documentation of the mechanisms used to ensure compliance with legal requirements.

**ON-SITE**

The team will interview human resource personnel and review relevant minutes of meetings in which these matters were discussed.

- II.3.03 The EAP's equal employment opportunity or employment equity policy:**
- a. clearly states its practices for recruitment, employment, transfer, and promotion of personnel;**
  - b. is appropriately disseminated to staff; and**
  - c. is used in recruitment processes.**

**Evidence of Compliance (II.3.03)**

**PRE-SITE**

Provide the EAP's policy on equal employment opportunity or employment equity.

- II.3.04 All staff members receive a copy of the EAP's grievance procedures which include:**
- a. the steps for personnel to lodge complaints, grievances, and appeals;**
  - b. requiring a timely written response to complaints, grievances, and appeals according to its stated procedures;**
  - c. documenting responses and actions taken in a manner consistent with stated procedures;**
  - d. informing the aggrieved staff member of the complaint's resolution; and**
  - e. maintaining a copy of the notification of resolution in the personnel record.**

***Interpretation (II.3.04):***

*Implementation of the standard requires appropriate training for staff on the EAP's grievance procedures.*

**Evidence of Compliance (II.3.04)**

**PRE-SITE**

Provide staff grievance policies and procedures. The team will review evidence provided for VII.3.05, the

Personnel Questionnaires, and the Affiliate Questionnaires.

ON-SITE

The team will review the quality improvement reports made to the owners or board of directors on staff complaints, grievances, and appeals, and documentation of corrective action.

- II.3.05            The EAP’s personnel policies prohibit nepotism and specify:**
- a. conditions for employing and retaining relatives of board of directors members;**
  - b. conditions for employing and retaining relatives of staff members;**
  - c. conditions for using relatives and business partners for referrals; and**
  - d. protection against favoritism in supervision and promotion.**

***Interpretation (II.3.05):***

*It is permissible for personnel or relatives of personnel to be members of the board of directors or advisory board, provided that such representation does not undermine the board of directors or advisory board’s independence and diversity, and provided that relatives do not work within the same hierarchy of supervision. “Relatives” include those persons related to staff members, the board of directors or the owners, through family of origin, extended family, or marital affiliation.*

**Evidence of Compliance (II.3.05)**

PRE-SITE

Provide policies regarding nepotism.

ON-SITE

The team will interview staff.

- II.3.06            The EAP’s policies on harassment include:**
- a. a clear definition of the kinds of behavior the EAP recognizes as harassment;**
  - b. a statement that the EAP will have zero tolerance for prohibited harassment;**
  - c. a prohibition against personnel harassing clients, supervisees, colleagues, or other persons or groups with whom they have contact as representatives of the EAP;**
  - d. the EAP’s commitment to take necessary and appropriate action to prevent or eliminate harassment on the job; and**
  - e. procedures for reporting harassment to management.**

***Interpretation (II.3.06):***

*The EAP’s harassment procedures should allow personnel to bypass any person in the reporting process who is also the alleged harasser. Implementation of the standard requires appropriate training for staff on the EAP’s harassment policies.*

**Evidence of Compliance (II.3.06)**

PRE-SITE

Provide harassment policies. The team will review the Personnel Questionnaires and the Client Questionnaires.

ON-SITE

The team will interview staff and review harassment reports.

- II.3.07            The EAP that provides services in the United States establishes a policy that addresses its role and responsibilities in relation to providing services to employees of host or customer organizations that require drug testing.**

**Evidence of Compliance (II.3.07)**

PRE-SITE

Provide the required policy.

NA The EAP does not provide services in the United States.

## **II.4 RECRUITMENT AND SELECTION PRACTICES\***

**II.4.01 The EAP maintains a detailed job description or description of responsibilities for all staff members.**

### **Evidence of Compliance (II.4.01)**

PRE –SITE

The team will review the Personnel Questionnaires.

ON-SITE

The team will select and review a sample of job descriptions.

**II.4.02 The EAP employs only those persons who are qualified according to the job description and selection criteria for the positions they occupy.**

### ***Interpretation (II.4.02):***

*All personnel have at least the requisite stated qualifications in their written job description, and professional personnel have the appropriate entry-level degree for their respective profession or discipline.*

**Note:** This standard applies only to personnel.

### **Evidence of Compliance (II.4.02)**

ON-SITE

The team will interview staff.

**II.4.03 Screening procedures for new staff members require, unless contravened by law:**

- a. review of state or provincial criminal records;**
- b. review of state or provincial child abuse and neglect registries for staff members that serve minors and vulnerable adults; and**
- c. review of sex offender registries.**

### ***Interpretation (II.4.03):***

*This standard applies to all programs and other staff, including security officers, who may have contact with clients. The EAP should ensure that its practices comply with federal and state or provincial laws regarding background checks. For example, EAPs that operate in the United States must comply with the federal Fair Credit Reporting Act. If the state or province in which the EAP operates prohibits criminal records checks or civil child abuse and neglect registry checks, the EAP complies with this standard by providing a copy of such law or regulation.*

### **Evidence of Compliance (II.4.03)**

PRE-SITE

Provide screening procedures.

ON-SITE

The team will review personnel records.

**II.4.04 The EAP verifies the credentials of all staff members and maintains documentation**

on:

- a. educational credentials;
- b. training;
- c. proof of current liability insurance;
- d. relevant experience;
- e. competence in the required role;
- f. recommendations of peers and former employers; and
- g. state or provincial registration, licensing, or certification requirements for their respective disciplines, if any.

***Interpretation (II.4.04):***

*Information from a national credential verification data bank, respective to the country at issue, is acceptable evidence of compliance. If a delay in procuring authentication of credentials occurs, such information must be finalized within 90 days of hire, unless such delays are beyond the control of the EAP.*

**Evidence of Compliance (II.4.04)**

PRE-SITE

Provide procedures for verifying credentials.

ON-SITE

The team will interview human resources personnel and will review personnel records.

**II.4.05            EAP policy prohibits permitting personnel or contractors who have a documented history of assaultive behavior to have interaction with, or provide oversight to, vulnerable populations.**

***Interpretation (II.4.05):***

*“Assaultive behavior” includes any offensive touching or threat of offensive interaction with a vulnerable population, such as children, youth, older adults, or impaired adults. Proscribed personnel or contractors include individuals who have been determined by judicial or administrative proceedings to have threatened or harmed a member of a vulnerable population. The standard prohibits the EAP from allowing such individuals to work directly with these populations or within a facility where interaction may occur.*

**Evidence of Compliance (II.4.05)**

PRE-SITE

Provide EAP policy related to the requirements of the standard.

ON-SITE

The team will interview the chief executive officer or his/her designee or human resources personnel.

**II.5                    HUMAN RESOURCES ASSESSMENT AND EVALUATION**

**II.5.01            The EAP annually seeks input, determines the level of personnel satisfaction, and institutes corrective action regarding the following:**

- a. leadership and management;
- b. personnel development, recognition, and career opportunities;
- c. quality of work environment;
- d. adequacy of compensation and benefits;
- e. interdepartmental communication; and
- f. EAP policies and procedures as they are revised.

***Interpretation (II.5.01):***

*Formal procedures include personnel and board of directors representation on a joint committee, separate committees dealing with personnel matters, a task force assigned review responsibility by management, a bargaining committee or union representative in the case of a unionized setting, and/or another functional means of providing the opportunity for personnel to have input on matters which affect them. These efforts are part of the EAP's short-term planning.*

**Evidence of Compliance (II.5.01)**

PRE-SITE

Provide procedures regarding personnel participation in review and changes of personnel policies. The team will review the Personnel Questionnaires.

ON-SITE

The team will interview human resources personnel.

**II.5.02            The EAP sets salary and benefits scales according to:**

- a. prevailing labor market trends for all staff members in comparable settings, in the case of non-unionized settings; and/or**
- b. the current collective bargaining agreement, in the case of a unionized organization.**

**Evidence of Compliance (II.5.02)**

PRE-SITE

Provide procedures for determining salaries and benefits.

ON-SITE

The team will interview human resources personnel.

**II.5.03            The EAP reviews its job descriptions and selection criteria at least every two years to ensure that:**

- a. education and experience requirements are relevant and appropriate to the EAP's programs, client needs, and specific services provided; and**
- b. qualifications or credentials are reasonably related to the level of competence required for the tasks involved.**

**Evidence of Compliance (II.5.03)**

PRE-SITE

Provide evidence that a review has occurred within the last two years and that the requirements of the standard have been addressed.

ON-SITE

The team will interview human resources personnel.

**II.5.04            An EAP that uses independent contractors:**

- a. carefully reviews its retention of independent contractors, such as affiliates and temporary staff members, against the Internal Revenue Service, Canada Customs and Revenue Agency, or other appropriate government or international requirements;**
- b. conforms with those requirements; and**
- c. does not place the organization at financial risk by failing to comply with applicable legal requirements.**

**Evidence of Compliance (II.5.04)**

ON-SITE

The team will interview the chief executive officer or his/her designee, financial personnel, or another responsible person who ensures that consultants are used and retained in compliance with requirements. The team will also review documentation as necessary.

NA The organization does not use independent contractors or temporary staff.

## **II.6 ACCOUNTABILITY AND PERFORMANCE REVIEW\*\***

**II.6.01 In conjunction with personnel, the EAP develops outcomes-oriented performance expectations for each position, which are discussed with each staff member.**

### **Evidence of Compliance (II.6.01)**

PRE-SITE

Provide personnel evaluation procedures. The team will review the Personnel Questionnaires.

ON-SITE

The team will review relevant documentation in personnel records and interview staff.

**II.6.02 Performance reviews are conducted at least annually between each staff member and his/her supervisor and include:**

- a. an assessment of job performance in relation to the expectations defined in the job description and the objectives established in the most recent evaluation;**
- b. clearly defined objectives for future performance; and**
- c. recommendations for further training and skill building, if applicable.**

### ***Interpretation (II.6.02):***

*Performance reviews are conducted in person.*

### **Evidence of Compliance (II.6.02)**

PRE-SITE

The team will review personnel evaluation procedures provided for II.6.01, and the Personnel Questionnaires.

ON-SITE

The team will review personnel records and interview staff.

**II.6.03 Staff members are given the opportunity to sign the written performance review, obtain a copy, and provide written comments before the report is entered into their personnel record.**

### **Evidence of Compliance (II.6.03)**

PRE-SITE

The team will review personnel evaluation procedures.

ON-SITE

The team will review relevant documentation in personnel records and interview staff.

**II.6.04 The EAP conducts an exit interview with all personnel who voluntarily leave the organization.**

### ***Interpretation (II.6.04):***

*This interview enables personnel to address administrative issues related to the transition, as well as to provide feedback on the EAP's strengths and weaknesses.*

**Evidence of Compliance (II.6.04)**

ON-SITE

The team will review personnel records to review documentation of exit interviews.

**II.7 AFFILIATE ENGAGEMENT\*\***

**NA** The EAP does not use affiliates.

**II.7.01** The EAP screens all affiliates and verifies credentials in accordance with the requirements of standards II.4.03 and II.4.04.

**Evidence of Compliance (II.7.01)**

PRE-SITE

Provide procedures for screening affiliates and verifying credentials.

ON-SITE

The team will review affiliate records.

**II.7.02** EAP contract files contain the following documents used in the affiliate selection process:

- a. affiliate agreements;
- b. job descriptions;
- c. resumes;
- d. copies of current licenses;
- e. malpractice insurance coverage; and
- f. signed confidentiality statements.

**Evidence of Compliance (II.7.02)**

ON-SITE

The team will review a sample of affiliate contract files.

**II.7.03** An EAP that uses the services of professionals on a per-interview, hourly, or independent contractor basis has regular mechanisms to ensure the quality of services provided.

***Interpretation (II.7.03):***

*“Regular mechanisms” may include quality improvement reviews, evaluation of services, or other assessments performed by a third-party.*

**Evidence of Compliance (II.7.03)**

PRE-SITE

Provide procedures regarding accountability for all part-time or contract personnel.

### **III. HEALTH AND SAFETY**

III.1 Environmental Quality

III.2 Accessibility\*\*

III.3 Functional Safety and Compliance with Health and Safety Codes\*\*

III.4 Emergency Response \*

## III. HEALTH AND SAFETY

### III.1 ENVIRONMENTAL QUALITY

**III.1.01 The physical environment reflects the EAP's commitment to provide comfort and dignity to clients and personnel of diverse backgrounds and ages.**

**Evidence of Compliance (III.1.01)**

PRE-SITE

The team will review the Personnel Questionnaires and the Client Questionnaires.

ON-SITE

The team will observe the physical surroundings.

**III.1.02 The EAP maintains a service environment in all offices that is safe, clean, free of fire hazards, smoke free, and professional.**

**Evidence of Compliance (III.1.02)**

PRE-SITE

The team will review the Personnel Questionnaires and the Client Questionnaires.

ON-SITE

The team will tour and observe facilities, offices, and equipment.

**III.1.03 The EAP has adequate office space to ensure client and counselor confidentiality.**

***Interpretation (III.1.03):***

*Counselor confidentiality may be achieved through a number of different mechanisms, e.g., soundproof rooms or white noise devices.*

**Evidence of Compliance (III.1.03)**

PRE-SITE

The team will review the Personnel Questionnaires and the Client Questionnaires.

ON-SITE

The team will tour and observe facilities and offices.

**III.1.04 The organization regularly seeks the input of clients and personnel about the quality of the environment and focuses its efforts on remediating identified problems.**

**Evidence of Compliance (III.1.04)**

PRE-SITE

The team will review the Personnel Questionnaires and Client Questionnaires.

### III.2 ACCESSIBILITY\*\*

**III.2.01 In planning the location of its offices and branches, the EAP considers:  
a. accessibility, availability, and affordability of public transportation;**

- b. location of other community resources; and
- c. special needs of actual and potential clients within the EAP's geographic service areas.

***Interpretation (III.2.01):***

*This standard requires the EAP to address the needs of persons with disabilities.*

**Evidence of Compliance (III.2.01)**

PRE-SITE

The team will review the Personnel Questionnaires and the Client Questionnaires.

ON-SITE

The team will interview the chief executive officer or his/her designee and observe facilities.

- III.2.02      An EAP office that serves populations with special needs, such as older adults, persons with disabilities, or young children:**
- a. designs and adapts its facilities to address the visual, auditory, linguistic, and motor limitations of its service population; and
  - b. provides assistive technology, as needed.

***Interpretation (III.2.02):***

*The standard requires the EAP to adapt its environment to the special needs of clients. Accessibility of services is an integral component to meeting need equitably. The EAP should attempt to deploy and adapt its facilities so that they are usable by all those in need and otherwise eligible. This includes providing or arranging for communication assistance for persons with special needs, who have difficulties making their service needs known, by providing assistance such as a computer, telephone amplification, sign language services, or other communication methods to facilitate service.*

*For EAPs that use affiliates, the EAP shall include the requirements of III.2.02 in the affiliate agreement as stated in V.5.02, and verify compliance through review of VII.6.02.*

**Evidence of Compliance (III.2.02)**

PRE-SITE

The team will review the Personnel Questionnaires.

ON-SITE

The team will interview the chief executive officer or his/her designee and observe the facility for adaptations to meet special needs.

NA              The EAP does not serve populations with special needs.

**III.3            FUNCTIONAL SAFETY AND COMPLIANCE WITH HEALTH AND SAFETY CODES \*\***

- III.3.01      The EAP complies with federal and state or provincial, and local legal requirements governing public accessibility, health, and safety.**

***Interpretation (III.3.01):***

*Applicable federal laws governing organizations that operate in the United States include Title III of the Americans with Disabilities Act (“ADA”), as well as various state and municipal laws. Applicable laws governing EAPs that operate in Canada include the Charter of Rights and Freedoms, Canadian Human Rights Act, provincial human rights statutes, and provincial and municipal building codes.*

### **Evidence of Compliance (III.3.01)**

#### **ON-SITE**

The team will observe the facility, review certificates of occupancy, licenses, or similar documents, and interview senior management.

### **III.3.02 For facilities, offices, and grounds that are regularly used, rented, or owned, the EAP maintains a permanent file of reports, including incident reports, that demonstrate its compliance with all:**

- a. certification of occupancy requirements;**
- b. zoning and building codes;**
- c. occupational safety and health administration codes;**
- d. health, sanitation, and fire codes; and**
- e. all other applicable safety codes.**

#### ***Interpretation (III.3.02):***

*Compliance with the standard can be demonstrated through documentation from public or private authorities. For example, some jurisdictions do not make inspection reports available to those who rent rather than own property. In such a case, the EAP may solicit a recognized expert to verify compliance with the law. This interpretation is intended to provide some flexibility for EAPs renting facilities from landlords who will not give them access to needed information. The organization should document its attempts to gain access to the information.*

**Note:** No organization is exempt from this standard.

### **Evidence of Compliance (III.3.02)**

#### **ON-SITE**

The team will review files that contain copies of applicable regulations, certificates of occupancy, and facility maintenance and incident reports.

### **III.3.03 The EAP conducts and documents:**

- a. regular inspections and preventative maintenance to ensure the safety of its premises, equipment, and fixtures; and**
- b. a monthly review of the physical plant's safety systems including fire safety and fire extinguishers, emergency exits, lighting, and other mechanisms that identify hazardous conditions.**

#### ***Interpretation (III.3.03):***

*"Hazardous conditions" considered by the standard include: uncovered electrical outlets; unsecured floor coverings or equipment; walk-in freezers or refrigerators that do not open from the inside; stairs without handrails; harmful water temperatures; inadequacy of light, ventilation and temperature; unscreened areas or unmarked glass doors; and unsafe use of electrical appliances and objects, such as hair dryers, space heaters, radios, or toys that are used by children or others who may be vulnerable.*

**Note:** The EAP will receive a rating of "2" if: its system of safety review addresses the standard's elements on at least a quarterly basis and repairs are made on an "as needed" basis; or a few items have not been inspected or received maintenance in a reasonably recent time period, such as within six months, and these exceptions are relatively minor. In all cases, in order to receive a rating of "2," the organization ensures a safe environment.

### **Evidence of Compliance (III.3.03)**

ON-SITE

The team will observe the facility, and review incident reports and documentation of inspections and preventive maintenance.

### **III.3.04 All EAP offices meet legal requirements for fire drills and inspections.**

### **Evidence of Compliance (III.3.04)**

PRE-SITE

Provide fire drill procedures, inspection reports, and the fire emergency plan.

ON-SITE

The team will interview staff.

### **III.3.05 The EAP follows anti-crime procedures to ensure that all buildings, grounds, and facilities are safe and secure for clients and personnel.**

#### ***Interpretation (III.3.05):***

*The EAP must tailor security measures to address high-risk environments, e.g., those posed by late evening hours or face-to-face counseling with volatile clients. Possible ways to address the standard include the use of dead-bolt doors, panic alarms, entrance bells, congregate working areas to improve safety, and other security linkages. Such procedures may include measures against vandalism and bars on windows.*

### **Evidence of Compliance (III.3.05)**

PRE-SITE

Provide security procedures.

ON-SITE

The team will review incident reports and interview staff, and clients when permissible.

## **III.4 EMERGENCY RESPONSE\***

- III.4.01 Procedures for responding to accidents, fire, medical emergencies, water emergencies, natural disasters, and other life threatening situations:**
- a. address the needs of persons with special needs;**
  - b. specify evacuation procedures and appropriate responses to medical emergencies;**
  - c. address voluntary or involuntary closure of facilities in emergency situations; and**
  - d. require notifying the client's parent or legal guardian, if appropriate, and other appropriate authorities.**

### **Evidence of Compliance (III.4.01)**

PRE-SITE

Provide a copy of the EAP's emergency procedures.

ON-SITE

The team will interview the chief executive officer or his/her designee.

- III.4.02 The EAP establishes policies that address workplace violence, including responding to emergency situations within the workplace, and the training of staff in these areas.**

***Interpretation (III.4.02):***

*Workplace violence includes situations that involve a threat or actual harm or violence to personnel or clients, including hostage situations, bomb threats, unlawful intrusion, or assaultive behavior.*

**Evidence of Compliance (III.4.02)**

PRE-SITE

Provide policies and procedures addressing workplace violence.

ON-SITE

The team will interview senior management.

- III.4.03      The EAP has a plan for handling workplace emergencies that includes the establishment of:**
- a. a temporary work site;**
  - b. a computer data recovery plan;**
  - c. emergency telephone, internet, and facsimile use;**
  - d. procedures for handling the media; and**
  - e. a system for communicating with the board of directors, personnel, clients, and the public.**

**Evidence of Compliance (III.4.03)**

PRE-SITE

Provide procedures for addressing emergency situations.

ON-SITE

The team will interview staff.

## **IV. FINANCE**

- IV.1 Financial Planning\*\*
- IV.2 Financial Information\*\*
- IV.3 Fiscal Management System\*\*
- IV.4 Financial Accountability\*
- IV.5 Payroll
- IV.6 Management of Investments

## **IV. FINANCE**

### **IV.1 FINANCIAL PLANNING\*\***

- IV.1.01 The EAP has a budget that serves as a plan for managing its financial resources for the fiscal year and includes provisions for:**
- a. staff training;**
  - b. performing evaluation activities;**
  - c. administrative overhead;**
  - d. travel, if appropriate; and**
  - e. staff salaries.**

**Evidence of Compliance (IV.1.01)**

ON-SITE

The team will review the EAP's budget with guidance from a financial representative at the EAP. The team will also review minutes from financial committee meetings and interview management and financial personnel, as necessary.

- IV.1.02 The owners/senior management or board of directors:**
- a. reviews and approves all planned deviations of significance from, and revisions to, the budget prior to implementation; and**
  - b. ensures that budget-to-actual variance analyses are performed after year-end numbers are finalized.**

**Evidence of Compliance (IV.1.02)**

PRE-SITE

Provide the most recent budget review by the owners/senior management or board of directors.

- IV.1.03 At least monthly, the EAP conducts an analysis of financial performance against budgeted projections.**

**Evidence of Compliance (IV.1.03)**

PRE-SITE

Provide written material regarding analyses of financial performance or sample monthly reports.

ON-SITE

The team will interview the chief financial officer or equivalent.

- IV.1.04 Annually, the EAP conducts an inventory of significant assets, including securities, and compares them with permanent records.**

**Evidence of Compliance (IV.1.04)**

ON-SITE

The team will review fiscal records and interview the chief financial officer or equivalent.

### **IV.2 FINANCIAL INFORMATION\*\***

**IV.2.01 External EAPs have sufficient financial resources to cover operational expenses for the next 12 months.**

***Interpretation (IV.2.01):***

*“Financial resources” include cash and/or a credit line.*

**Evidence of Compliance (IV.2.01)**

PRE-SITE

Provide the EAP’s budget planning procedures.

ON-SITE

The team will review the EAP’s budget with guidance from a financial representative at the EAP.

NA The EAP is internal.

**IV.2.02 As part of its short-term planning process, the EAP analyzes information on service revenues and actual service delivery costs per client served on a per capita basis to evaluate effectiveness and efficiency of services.**

***Interpretation (IV.2.02):***

*The analysis can be done independently or with an outside entity.*

**Evidence of Compliance (IV.2.02)**

PRE-SITE

Provide the most recent analysis of service revenue and cost information as per the requirements of the standard.

ON-SITE

The team will interview the chief financial officer or equivalent.

**IV.2.03 The EAP bills its customers on a per capita basis and provides its customer organizations with a copy of its procedures.**

***Interpretation (IV.2.03):***

*The cost structure and pricing of EAP services for customers is based on the following:*

- *projected utilization rates;*
- *number of counseling sessions provided;*
- *additional training/consulting services provided;*
- *educational level of counselors;*
- *special staff requirements, e.g., bilingual abilities;*
- *financial impact of traumatic/change events on the EAP;*
- *cost per hour for counseling or cost per client, if appropriate;*
- *audit/evaluation requirements, if appropriate;*
- *unusual travel requirements;*
- *costs per hour for account management;*
- *costs related to MIS, and other overhead expenses;*
- *costs related to providing telephone and online services, if appropriate; and*
- *costs related to subcontracts.*

**Evidence of Compliance (IV.2.03)**

PRE-SITE

Provide billing procedures, including procedures that address costs and pricing of services. List all line items charged in an EAP contract. EAPs that do not bill per capita must provide an explanation of the billing method used. The team will review the Stakeholder Questionnaires.

ON-SITE

The team will interview the chief financial officer or financial personnel.

NA The EAP is internal.

### **IV.3 FISCAL MANAGEMENT SYSTEM \*\***

#### **IV.3.01 Annual financial statements are prepared in accordance with Generally Accepted Accounting Principles.**

##### **Evidence of Compliance (IV.3.01)**

ON-SITE

The team will review financial statements, the accounting ledger, and interview the chief financial officer or financial personnel.

#### **IV.3.02 The EAP maintains an accounting ledger that addresses the timely payment of accounts payable and collection of accounts receivable.**

##### **Evidence of Compliance (IV.3.02)**

ON-SITE

The team will review the accounting manual and interview the chief financial officer or equivalent, if necessary.

#### **IV.3.03 The EAP acts in accordance with an internal accounting control system that addresses:**

- a. prevention of error, mismanagement, or fraud;**
- b. an inclusive and descriptive chart of accounts;**
- c. prompt and accurate recording of revenues and expenses;**
- d. control over prompt payment of expenditures; and**
- e. information on all funds, including each fund's source and pertinent regulations governing each fund.**

##### ***Interpretation (IV.3.03):***

*Compliance with this standard can be demonstrated through mandatory periods in which accounts are controlled by a staff member other than the primary accountant, or by having two individuals responsible for the accounts.*

**Note:** If one or more elements of the standard are completely absent from EAP operations, then a rating of "4" must be assigned.

##### **Evidence of Compliance (IV.3.03)**

PRE-SITE

Provide relevant portions of the EAP's internal accounting procedures that address the elements of the standard.

ON-SITE

The team will interview financial personnel.

- IV.3.04**      **The EAP's accounting procedures also address:**
- a. safeguarding and verifying assets;**
  - b. separation of duties to the extent possible; and**
  - c. disbursement and receipt of monies.**

***Interpretation (IV.3.04):***

*Please note that these procedures must address cash, checks, and other accounts.*

**Note:**            If one or more elements of the standard are completely absent from EAP operations, then a rating of "4" must be assigned.

**Evidence of Compliance (IV.3.04)**

PRE-SITE

Provide relevant portions of the EAP's internal accounting procedures that address the elements of the standard.

ON-SITE

The team will interview financial personnel.

- IV.3.05**      **The EAP seeks to conserve its fiscal resources by:**
- a. taking advantage of benefits allowed tax-exempt organizations, where applicable;**
  - b. maintaining sound policies regarding purchasing and inventory control; and**
  - c. using competitive bidding, when applicable, according to board of directors policy and law or regulation.**

**Evidence of Compliance (IV.3.05)**

PRE-SITE

Provide procedures for purchasing and inventory control.

ON-SITE

The team will interview the chief financial officer or equivalent.

- IV.3.06**      **Accounting records are kept up-to-date and balanced on a monthly basis, as demonstrated by:**
- a. reconciliation of the bank statement to the general ledger;**
  - b. reconciliation of subsidiary records to the general ledger;**
  - c. up-to-date posting of cash receipts and disbursements;**
  - d. monthly updating of the general ledger; and**
  - e. review of the bank reconciliation by at least two personnel, one of whom is not involved in maintaining the accounting records.**

***Interpretation (IV.3.06):***

*Subsidiary records include, but are not limited to: Accounts Receivable, Accounts Payable, and Property, Plant, and Equipment.*

**Note:**            If one or more elements of the standard are completely absent from EAP operations, then a rating of "4" must be assigned.

**Evidence of Compliance (IV.3.06)**

PRE-SITE

Provide the portion of the EAP's internal accounting procedures that addresses the requirements of the standard.

## ON-SITE

The team will interview the chief financial officer or equivalent. All pertinent records should be made available on-site for the team to review.

- IV.3.07**      **Oversight and management of the EAP’s accounting system requires that:**
- a. a fiscal officer or business manager who is responsible for maintaining the financial accounts has prior accounting experience, and an accounting degree or CPA credential, as appropriate to the EAP’s size and complexity;**
  - b. all personnel who use the accounting system are oriented to the system and are retrained regarding any changes; and**
  - c. internal control systems are managed or reviewed by more than one person.**

### **Evidence of Compliance (IV.3.07)**

#### PRE-SITE

Provide the job description and resume of the person responsible for maintaining the accounting system.

#### ON-SITE

The team will interview the chief financial officer or equivalent. All pertinent records should be made available on-site for the team to review.

- IV.3.08**      **As required by law, the EAP makes timely payments to, or provides proof of exemption from, the appropriate taxing authorities.**

### ***Interpretation (IV.3.08):***

*For EAPs operating in the United States, taxing authorities include the Internal Revenue Service, state and local tax bodies, FICA, and property tax assessors. For EAPs operating in Canada the taxing authority is the Canada Customs and Revenue Agency.*

### **Evidence of Compliance (IV.3.08)**

#### PRE-SITE

Provide internal accounting procedures that address the elements of the standard.

#### ON-SITE

The team will review proofs of payment or exemption.

## **IV.4      FINANCIAL ACCOUNTABILITY\***

- IV.4.01**      **The EAP makes summary information regarding its financial status available for inspection by external reviewers.**

### **Evidence of Compliance (IV.4.01)**

#### ON-SITE

The team will review summary information on the EAP’s financial status, including selected financial records or statements from accountants, banks, or other sources of financial information.

- IV.4.02**      **An EAP that annually reports its revenues at or in excess of \$500,000, or is otherwise required, undergoes an audit of its financial statements and such an audit is performed:**
- a. within 180 days of the end of its fiscal year; and**
  - b. by an independent, certified public accountant who is approved by the owners or board of directors.**

**Interpretation (IV.4.02):**

*Organizations in the United States receiving in excess of \$300,000 in federal funds must perform an audit to comply with the requirements of the Single Audit Act, 31 U.S.C. §§ 7501 et. seq. Note that many organizations are required to perform an audit to receive grant monies, lines of credit, or other third-party funding.*

**Evidence of Compliance (IV.4.02)**

ON-SITE

The team will review the EAP's audit and management letter, if applicable.

NA The EAP does not have annual revenues at or in excess of \$500,000 and is not otherwise required to perform an audit.

- IV.4.03 In EAPs that conduct an audit, the owners or board of directors:**
- a. review the findings, the accompanying financial statements, and any management letter that may accompany the audit report;**
  - b. accepts the audit; and**
  - c. ensures that management promptly acts on the recommendations of a management letter, if any.**

**Interpretation (IV.4.03):**

*In some cases, a management letter may have been requested and is descriptive of sound practices or contains suggestions, but does not identify or recommend remedies for EAP practices that the accounting firm believes are a departure from sound practices. In such a case, the standard requires that the board of directors or a designated committee reviews its contents.*

**Evidence of Compliance (IV.4.03)**

ON-SITE

The team will interview the chairperson of the audit committee or other designated person, and review minutes of the board of directors' or senior management meeting at which the audit and management letter, as applicable, were formally accepted, and reflect that management will act on recommendations, as applicable.

NA The EAP is not required to conduct an audit.

- IV.4.04 The EAP that reports less than \$500,000 in revenues annually, and is not otherwise required to file an audit, undergoes a review of financial statements, with a management letter if applicable, and such a review is performed:**
- a. at the end of each fiscal year; and**
  - b. by an independent certified public accountant approved by the owners or board of directors.**

**Evidence of Compliance (IV.4.04)**

PRE-SITE

Provide a copy of the most recent review of financial statements and any accompanying management letter.

NA The EAP does not report less than \$500,000 in annual revenues or the EAP is otherwise required to file an audit.

- IV.4.05 In an EAP that receives less than \$500,000 in revenues and does not conduct an audit, the owners or board of directors:**

- a. **meets with the independent certified public accountant within six months of completion to discuss the review of the financial statements and any management letter that may accompany this review; and**
- b. **makes this review available for public inspection.**

**Evidence of Compliance (IV.4.05)**

ON-SITE

The team will interview the chairperson of the audit committee or other designated person and review owners or board of directors meeting minutes at which the review of the financial statement and management letter, if applicable, were formally discussed with the certified public accountant.

NA                    The EAP does not have revenues less than \$500,000 or the EAP conducts an audit.

**IV.5                    PAYROLL**

**IV.5.01                The EAP reviews and approves payroll expenditures and:**

- a. **documents changes in time and overtime records;**
- b. **authorizes payment for new hires and severance for terminations;**
- c. **oversees mandatory deductions and rates of pay; and**
- d. **ensures separation of payroll funds.**

**Evidence of Compliance (IV.5.01)**

PRE-SITE

Provide payroll procedures.

ON-SITE

The team will interview the chief financial officer or his/her designee who has been assigned responsibility for payroll records.

**IV.5.02                The EAP’s payroll practices comply with federal and state, or provincial, wage and hour laws.**

**Evidence of Compliance (IV.5.02)**

ON-SITE

The team will interview the person responsible for fiscal management for outstanding Department of Labor claims or legal opinion regarding sufficiency of agency practices.

**IV.6                    MANAGEMENT OF INVESTMENTS**

NA                    The EAP does not invest any of its funds.

**IV.6.01                In EAPs that invest funds, the owners/senior management or board of directors follows and biennially reviews an investment policy that outlines:**

- a. **acceptable levels of risk;**
- b. **criteria for contracting with investment advisors or firms; and**
- c. **protocols for making investment decisions.**

**Evidence of Compliance (IV.6.01)**

PRE-SITE

Provide the EAP’s investment policies and procedures.

ON-SITE

The team will interview the chairperson of the designated committee or other agent of the board of directors and review minutes/records of the designated body.

- IV.6.02**      **A designated committee or agent of the owners/senior management or board of directors:**
- a. oversees and reviews both the investment of funds and the management, purchase, or sale of real estate, securities, and other assets;**
  - b. ensures that practices conform to applicable legal and regulatory requirements; and**
  - c. reports the status of investments and investment recommendations to the owners/senior management or board of directors.**

**Evidence of Compliance (IV.6.02)**

**PRE-SITE**

Provide the EAP's investment policies, procedures, or other written guidelines that address investment of funds.

**ON-SITE**

The team will interview the chairperson of the designated committee or other agent of the owners/senior management or board of directors and review minutes/records of the designated body.

## **V. EAP LEGAL LIABILITY**

- V.1 General Principles
- V.2 Liability Insurance\*\*
- V.3 Record-Keeping Practices and Procedures\*
- V.4 Security of Information\*\*
- V.5 Affiliate Agreements\*
- V.6 Subcontractor Agreements\*

## V. EAP LEGAL LIABILITY

### V.1 GENERAL PRINCIPLES

**V.1.01 The EAP utilizes legal counsel to clarify the meaning of laws or regulations governing the services it operates, or to respond to other legal inquiries.**

***Interpretation (V.1.01):***

*The EAP consults with legal counsel regarding matters involving unusual disclosure of client information and associated risks, such as when courts, public officials, investigative units, law enforcement bodies, or others request special or unusual information about an individual or family. This standard also applies to issues related to the confidentiality of records and the conditions under which they may be subpoenaed.*

**Evidence of Compliance (V.1.01)**

ON-SITE

The team will review letters of agreement or other evidence of arrangements for legal advice and interview the chief executive officer or his/her designee.

**V.1.02 The EAP reduces its potential loss and liability by:**

- a. assigning responsibilities related to liability matters to qualified persons whose job descriptions specifically include oversight of risk management; and**
- b. developing a process to identify and analyze the nature, severity, and frequency of risks.**

**Evidence of Compliance (V.1.02)**

PRE-SITE

Provide relevant job descriptions for personnel, procedures, and other related material regarding liability.

ON-SITE

The team will interview the chief executive officer or his/her designee and/or other relevant personnel.

**V.1.03 The EAP follows procedures regarding appropriate handling of media inquiries that protect the confidentiality of clients.**

**Evidence of Compliance (V.1.03)**

PRE-SITE

Provide confidentiality procedures that address media relations.

### V.2 LIABILITY INSURANCE\*\*

**V.2.01 The EAP provides insurance coverage for staff members related to the scope of their activities performed on the EAP's behalf and:**

- a. provides written notification to staff on the amount and type of such coverage;**
- b. advises the staff of the extent and limits of such coverage; and**
- c. the amount purchased is proportional to the EAP's size and nature of potential incidents.**

***Interpretation (V.2.01):***

*All staff members must receive this information at the initiation of their association with the EAP and*

*when any changes to the level and/or type of insurance coverage occur.*

**Evidence of Compliance (V.2.01)**

PRE-SITE

Provide a description of the insurance coverage that is provided for staff.

ON-SITE

The team will interview human resources personnel, and review insurance policies, if necessary.

- V.2.02            The EAP maintains appropriate insurance or bonding coverage for all EAP staff members who sign checks, handle cash or contributions, or manage funds to cover losses that may be incurred.**

**Evidence of Compliance (V.2.02)**

PRE-SITE

Provide written documentation that the appropriate personnel are bonded or otherwise insured.

**V.3                RECORD-KEEPING PRACTICES AND PROCEDURES\***

- V.3.01            The EAP maintains client records in a manner consistent with applicable legal requirements and the EAP's confidentiality policy.**

**Evidence of Compliance (V.3.01)**

PRE-SITE

Provide procedures for maintaining client records, including relevant sections of the EAP's confidentiality policy.

ON-SITE

The team will observe the EAP's system for maintaining client records and review client records.

- V.3.02            EAP policy states that a separate and distinct record is maintained for each client that is never part, of or stored with, any other record for the client.**

***Interpretation (V.3.02):***

*This standard includes instances when family members receive services as a group. Records are maintained on the individual. Other records include managed care, personnel, or medical records.*

**Evidence of Compliance (V.3.02)**

PRE-SITE

Provide the relevant policy.

ON-SITE

The team will review a sample of computer or written records.

- V.3.03            EAP policy establishes whether client records are the property of the EAP or the customer organization.**

**Evidence of Compliance (V.3.03)**

PRE-SITE

Provide the required policy.

- V.3.04            EAP record retention procedures address:**  
**a. how long affiliates may retain client records;**

- b. whether affiliates are able to maintain a copy of the record after the record is returned to the EAP; and
- c. whether affiliates are able to maintain a copy of the record after their contract with the EAP ceases.

**Evidence of Compliance (V.3.04)**

PRE-SITE

Provide record retention procedures that pertain to affiliates.

- V.3.05** After clients have ceased contact with the EAP, all client records are retained by the EAP for a minimum period of three years or as required by state or provincial law.

**Evidence of Compliance (V.3.05)**

PRE-SITE

Provide client record retention procedures.

**V.4 SECURITY OF INFORMATION\*\***

- V.4.01** The EAP has procedures to protect service and organizational records, whether in electronic or paper form, from destruction by fire, water, loss, or other damage, and from unauthorized access, which include:
- a. daily back-up of all electronic records;
  - b. electronic back-up maintained off-premises; and
  - c. storage of paper records in cabinets that are kept in a secure location, access to which is limited to those authorized to retrieve files in accord with X.2.02 and X.2.06.

***Interpretation (V.4.01):***

*Secure storage may include locked file cabinets; a locked file room with limited access or a gatekeeper system whereby one person or a few people can unlock the file storage area or access the files themselves; and/or a system using a keypad or keys where only certain individuals are given the keypad code or copies of the keys. See also VII.8 Information Management.*

**Evidence of Compliance (V.4.01)**

PRE-SITE

Provide procedures for protecting records as per the standard.

ON-SITE

The team will observe the record-keeping system, procedures, and safeguards.

- V.4.02** EAP procedures govern the retention, maintenance, and destruction of records of former clients and include protocols on:
- a. protection of privacy;
  - b. legitimate requests by former clients for access to information, when permissible by law;
  - c. requests for records of deceased clients; and
  - d. disposition of records in the event of the EAP's dissolution.

***Interpretation (V.4.02):***

*Disposition of records may occur via use of a shredder or a destruction vendor.*

**Evidence of Compliance (V.4.02)**

PRE-SITE

Provide procedures that address the retention, maintenance, and destruction of records of former clients.

ON-SITE

The team will observe the record-keeping system.

- V.4.03            The organization protects electronically maintained data as follows:**
- a. all computers have up-to-date anti-virus protection; and**
  - b. secure protocols, including the use of passwords and firewalls, govern the electronic collection and transfer of sensitive data.**

**Evidence of Compliance (V.4.03)**

PRE-SITE

Provide procedures for protecting electronically-maintained data as per the standard.

ON-SITE

The team will interview the person responsible for information management who will provide a demonstration of the system.

- V.4.04            The EAP that transmits information electronically complies with all applicable legal standards and requirements, including the use of appropriate formats, codes, and identifiers to ensure the security and privacy of such data.**

**Evidence of Compliance (V.4.04)**

ON-SITE

The team will observe the record-keeping system, procedures, and safeguards.

- V.4.05            To protect client files, access to databases, and confidential information, the EAP has security systems for programs in high-risk areas to deter facility break-ins after hours.**

**Evidence of Compliance (V.4.05)**

ON-SITE

The team will observe the record-keeping system, procedures, and safeguards.

**V.5                AFFILIATE AGREEMENTS\***

**NA                The EAP does not use affiliates.**

- V.5.01            Affiliate agreements are comprehensive and address:**
- a. the same performance standards required of EAP staff members, such as training and credentials; and**
  - b. roles and responsibilities of the EAP and affiliate.**

***Interpretation (V.5.01):***

*Please see section VIII.3 Competence of Affiliates for additional information on affiliate credentials.*

**Evidence of Compliance (V.5.01)**

ON-SITE

The team will interview affiliates and review a sample of affiliate agreements.

- V.5.02            Affiliate agreements include, but are not limited to:**

- a. **compliance with all applicable laws, including health, safety, and accessibility laws;**
- b. **record maintenance and destruction;**
- c. **access to records;**
- d. **transfer of confidential information;**
- e. **hours of operation; and**
- f. **use of standard data collection and client information forms.**

***Interpretation (V.5.02):***

*Record maintenance, as referenced in element (b) of this standard, must address the secure storage of client records to which only the affiliate has access.*

**Note:** If one or more elements of the standard are completely absent from EAP operations, then a rating of "4" must be assigned.

**Evidence of Compliance (V.5.02)**

PRE-SITE

Provide a sample of affiliate agreements. The team will review the Affiliate Questionnaires.

ON-SITE

The team will interview human resources personnel.

- V.5.03**      **Within the first three months of hire, all affiliates sign a statement acknowledging that they have received the following information:**
- a. **the EAP's policies and procedures;**
  - b. **responsibilities related to mandated reporting, including identification of clinical indicators of suspected abuse and neglect, as required by federal and state or provincial law;**
  - c. **reportable criminal behavior, including criminal, acquaintance, and statutory rape; and**
  - d. **duty to warn.**

**Evidence of Compliance (V.5.03)**

PRE-SITE

The team will review the Affiliate Questionnaires.

ON-SITE

The team will interview human resources personnel and review signed statements.

- V.5.04**      **Affiliate agreements state that EAP client records are the property of the EAP rather than the affiliate.**

***Interpretation (V.5.04):***

*Please see V.5.02 for additional information related to maintenance of EAP client records.*

**Evidence of Compliance (V.5.04)**

PRE-SITE

Provide procedures for establishing affiliate agreements.

ON-SITE

The team will review a sample of affiliate agreements.

- V.5.05**      **Affiliate agreements require the affiliate to keep records that reflect services provided for each session and the time and date of each session rendered.**

**Evidence of Compliance (V.5.05)**

PRE-SITE

Provide procedures for establishing affiliate agreements.

ON-SITE

The team will review a sample of affiliate agreements.

- V.5.06**            **Affiliate agreements stipulate that a minimum of five percent of the EAP's total number of affiliate records per year are evaluated on a semi-annual basis, or more frequently for affiliates with less than one year of experience with the EAP.**

***Interpretation (V.5.06):***

*Please see VII.6.02 for additional information on the annual site visit process for affiliates and VII.3.02 for the criteria to be used in this process.*

**Evidence of Compliance (V.5.06)**

PRE-SITE

Provide procedures for establishing affiliate agreements.

ON-SITE

The team will review a sample of affiliate agreements.

- V.5.07**            **Agreements with affiliates require them to carry professional liability insurance in the amount of \$1 million/\$1 million, or as required by state or provincial law.**

**Evidence of Compliance (V.5.07)**

PRE-SITE

The team will review the Affiliate Questionnaires.

ON-SITE

The team will interview the chief executive officer or his/her designee and inspect agreements and insurance policies in affiliate records.

**V.6**                **SUBCONTRACTOR AGREEMENTS\***

- NA**                **The EAP does not use subcontractors.**

- V.6.01**            **Agreements with subcontractors require the same quality and level of staff training as that of the EAP.**

**Evidence of Compliance (V.6.01)**

PRE-SITE

Provide procedures for monitoring, evaluating, and improving the quality of purchased services. The team will review the Stakeholder Questionnaires.

ON-SITE

The team will interview the chief executive officer or his/her designee, and the quality improvement director or equivalent.

- V.6.02**            **The EAP requires each subcontractor to keep records of all training/education provided to subcontractor staff and to make these available to the EAP and/or external reviewers upon request.**

**Evidence of Compliance (V.6.02)**

PRE-SITE

Provide material describing the EAP's system for monitoring, evaluating, and improving the quality of purchased services. The team will review the Stakeholder Questionnaires.

ON-SITE

The team will interview the chief executive officer or his/her designee, and the quality improvement director or equivalent.

**V.6.03            The EAP requires subcontractors to collect and report demographic information to the EAP on the clients they serve, including utilization rates, as defined by the EAP.**

**Evidence of Compliance (V.6.03)**

PRE-SITE

Provide three samples of demographic information reports. The team will review the Stakeholder Questionnaires.

**V.6.04            Subcontractor agreements stipulate that the EAP annually conducts random site reviews of a five percent sample of subcontractors to review the following:**

- a. appropriateness of service delivery procedures;**
- b. safety of physical facilities;**
- c. possession of current licensure; and**
- d. compliance with EAP contract requirements.**

**Evidence of Compliance (V.6.04)**

PRE-SITE

Provide procedures for monitoring, evaluating, and improving the quality of services purchased from subcontractors.

ON-SITE

The team will interview the chief executive officer or his/her designee, and the quality improvement director or equivalent, and review relevant agreements.

## **VI. CONTRACTS FOR EAP SERVICES**

- VI.1 Program Plans
- VI.2 Contractual Agreements\*
- VI.3 Account Management Procedures
- VI.4 Contract Management with Customer Organizations\*\*
- VI.5 Reports to Customer Organizations\*

## VI. CONTRACTS FOR EAP SERVICES

**NA** The EAP is internal.

### **VI.1 PROGRAM PLANS**

**VI.1.01** Each EAP contract includes a program plan that describes the facilities, equipment, and staff resources required.

#### **Evidence of Compliance (VI.1.01)**

PRE-SITE

Provide copies of three program plans.

**VI.1.02** The program plan includes mechanisms for promotional and employee communications that include, but are not limited to, the following, as applicable:

- a. printed communications;
- b. company website;
- c. referral resource database;
- d. listserves, discussion groups, chat rooms, instant messenger, and other electronic communication tools;
- e. training of supervisors, key management, and union representatives;
- f. employee orientation; and
- g. other promotional and educational activities.

#### **Evidence of Compliance (VI.1.02)**

PRE-SITE

Provide three program plans and highlight the outlined activities.

**VI.1.03** The EAP conducts a needs analysis, when requested by the customer organization, to facilitate program design, which includes:

- a. a confidential survey of employee and management representatives to identify key problem areas;
- b. employee profiles and demographics;
- c. employee absenteeism rates;
- d. employee turnover rates;
- e. accidental injuries;
- f. health insurance costs; and
- g. worker's compensation claims.

#### **Evidence of Compliance (VI.1.03)**

PRE-SITE

Provide samples of needs analyses.

ON-SITE

The team will interview appropriate staff, if necessary.

**VI.1.04** When legally permissible, and at the request of a customer, the EAP generates a

**profile that describes the work force demographics and the characteristics of the customer organization, which may include one or more of the following:**

- a. employee locations;**
- b. health coverage, including mental health benefits;**
- c. products or services provided by the customer organization; and**
- d. unionized or non-unionized setting.**

**Evidence of Compliance (VI.1.04)**

PRE-SITE

Provide samples of customer profiles.

ON-SITE

The team will interview appropriate staff, if necessary.

## **VI.2 CONTRACTUAL AGREEMENTS\***

**VI.2.01 The EAP includes written information about its service design and implementation in all bids and proposals to customer organizations.**

**Evidence of Compliance (VI.2.01)**

PRE-SITE

Provide sample bids or proposals.

ON-SITE

The team will interview appropriate staff, if necessary.

**VI.2.02 The EAP establishes and abides by formal contractual agreements that include, but are not limited to:**

- a. objectives for the contract;**
- b. the services to be provided;**
- c. financial terms;**
- d. mutual indemnification, when appropriate; and**
- e. mutual obligations of the EAP and customer organization.**

**Evidence of Compliance (VI.2.02)**

PRE-SITE

Provide contracting procedures highlighting the requirements of the standard. The team will review the Stakeholder Questionnaires.

ON-SITE

The team will review a sample of contracts.

**VI.2.03 Contractual agreements also specify:**

- a. evaluation methodologies;**
- b. quality improvement expectations;**
- c. administrative and clinical record-keeping procedures;**
- d. reporting procedures; and**
- e. auditing procedures.**

**Evidence of Compliance (VI.2.03)**

PRE-SITE

Provide contracting procedures highlighting the requirements of the standard. The team will review evidence provided for VII.4.01. The team will review the Stakeholder Questionnaires.

ON-SITE

The team will review a sample of contracts.

**VI.2.04            The EAP contract describes the professional qualifications of its staff members and affiliates.**

**Evidence of Compliance (VI.2.04)**

PRE-SITE

Provide contracting procedures highlighting the requirements of the standard. The team will review the Stakeholder Questionnaires.

ON-SITE

The team will review a sample of contracts.

### **VI.3                ACCOUNT MANAGEMENT PROCEDURES**

**VI.3.01            For each EAP contract, the EAP:**  
**a. designates an account manager; and**  
**b. delineates clear lines of responsibility for all aspects of the contract.**

**Evidence of Compliance (VI.3.01)**

PRE-SITE

Provide account management procedures.

ON-SITE

The team will review a sample of contracts.

**VI.3.02            For each EAP contract, the EAP also:**  
**a. plans for implementation of the contract by the respective account manager and customer organization liaison; and**  
**b. projects utilization rates.**

**Evidence of Compliance (VI.3.02)**

PRE-SITE

Provide account management procedures.

ON-SITE

The team will review a sample of contracts.

**VI.3.03            The EAP maintains up-to-date information on each customer organization's demographics, business, and covered EAP benefits.**

**Evidence of Compliance (VI.3.03)**

PRE-SITE

Provide account management procedures.

ON-SITE

The team will interview contract managers.

### **VI.4                CONTRACT MANAGEMENT WITH CUSTOMER ORGANIZATIONS\*\***

**VI.4.01            Prior to initiating a contract, and annually thereafter, the EAP and customer organizations determine:**

- a. how a case is defined and how utilization is calculated;
- b. how a “new” client is defined;
- c. the amount (e.g., number of hours) of clinical and account management time projected per defined period;
- d. desired outcomes and performance standards;
- e. the means of measuring these outcomes; and
- f. the format and frequency of reports.

***Interpretation (VI.4.01):***

*The standard requires the EAP to designate the numerator and denominator for purposes of utilization as addressed in (a). Training to supervisors and other units are not acceptable factors to be addressed in utilization.*

**Evidence of Compliance (VI.4.01)**

PRE-SITE

Provide contract management procedures. The team will review the Stakeholder Questionnaires.

ON-SITE

The team will review a sample of contracts.

**VI.4.02            The EAP retains copies of periodic reports on file.**

**Evidence of Compliance (VI.4.02)**

PRE-SITE

Provide sample reports for three contracts.

ON-SITE

The team will review account files for the presence of reports.

**VI.4.03            The EAP conducts an annual face-to-face or telephone interview with representatives of customer organizations to determine their satisfaction with the EAP and the service contract.**

***Interpretation (VI.4.03):***

*The surveys conducted as part of this standard may be included in the reports described in standard VI.5.04.*

**Evidence of Compliance (VI.4.03)**

PRE-SITE

Provide the interview protocol used for determining customer satisfaction. The team will review the Stakeholder Questionnaires.

ON-SITE

The team will interview relevant personnel.

**VI.5                REPORTS TO CUSTOMER ORGANIZATIONS\***

- VI.5.01            The EAP account manager reports to the customer organization at least quarterly, or as indicated by the EAP, on the demographics of clients served, including:**
- a. types of services requested;
  - b. number of sessions;
  - c. outcome measures, such as problem resolution rate and client satisfaction; and
  - d. any other indicators requested by the customer organization.

**Evidence of Compliance (VI.5.01)**

PRE-SITE

Provide sample reports for the last two quarters for three contracts.

ON-SITE

The team will interview account managers, if necessary.

**VI.5.02        The EAP provides customer organizations with utilization reports at least quarterly, or as indicated by the EAP, that address variables such as:**

- a. cases opened;**
- b. problem resolution rate;**
- c. website usage;**
- d. training/seminar participants;**
- e. client telephone contacts; and**
- f. supervisor telephone contacts, as applicable.**

**Evidence of Compliance (VI.5.02)**

PRE-SITE

Provide the most recent utilization reports for three contracts. The team will review the Stakeholder Questionnaires.

ON-SITE

The team will interview the quality improvement director or equivalent.

**VI.5.03        Each customer organization receives a year-end summary that contains:**

- a. documented results of evaluation activities and whether the objectives for the EAP contract were achieved;**
- b. an explanation of successes or failures connected with each objective;**
- c. assessments of the resources required/used to meet objectives;**
- d. a plan for improving performance in areas needing improvement; and**
- e. intended changes to the contract for the following year.**

**Evidence of Compliance (VI.5.03)**

PRE-SITE

Provide annual summaries for three contracts. The team will review the evidence provided for VI.5.03 (a) and the Stakeholder Questionnaires.

**VI.5.04        The EAP provides the results of satisfaction surveys at least quarterly, or as indicated by the host or customer organization, and the EAP's owners, board of directors, and/or senior management.**

***Interpretation (VI.5.04):***

*The compilation of such data may be done independently or through a consultant.*

**Evidence of Compliance (VI.5.04)**

ON-SITE

The team will interview the quality improvement director or equivalent.

**VI.5.05        Reporting procedures include protections to guard against breaches of confidentiality for data requested by program managers of host or customer organizations.**

**Evidence of Compliance (VI.5.05)**

PRE-SITE

Provide the section of the EAP's confidentiality procedures that address customer reports.

ON-SITE

The team will select and review a sample of reports.

## **VII. Quality Improvement**

- VII.1 Quality Improvement Infrastructure\*
- VII.2 Evaluation of Performance\*\*
- VII.3 Internal Quality Monitoring\*\*
- VII.4 External Audits\*\*
- VII.5 Outcomes Measurement\*\*
- VII.6 Quality Improvement with Affiliates\*\*
- VII.7 Feedback Mechanisms
- VII.8 Information Management
- VII.9 Corrective Action\*

## VII. QUALITY IMPROVEMENT

### VII.1 QUALITY IMPROVEMENT INFRASTRUCTURE\*

#### *Interpretation (VII.1):*

*For the purposes of these standards, “long-term planning” and “strategic planning” are synonymous.*

- VII.1.01 The EAP quality improvement document:**
- a. is annually reviewed and updated;**
  - b. is based on program objectives, contract expectations, the previous year’s results, and services provided to customer organizations;**
  - c. includes a statement of goals and objectives for the coming year; and**
  - d. documents program evaluation methods that measure progress and results relative to these goals and objectives.**

#### **Evidence of Compliance (VII.1.01)**

PRE-SITE

Provide the quality improvement document.

ON-SITE

The team will interview the chief executive officer or his/her designee, and/or the quality improvement director or equivalent, and where applicable, review board of directors’ minutes that address review of the quality improvement document.

- VII.1.02 The quality improvement document specifies:**
- a. the information to be collected;**
  - b. procedures for retrieving and analyzing information;**
  - c. methods for monitoring and reporting results; and**
  - d. feedback mechanisms and corrective action.**

#### *Interpretation (VII.1.02):*

*Data collection mechanisms include, but are not limited to, client satisfaction questionnaires, organizational satisfaction questionnaires, personnel surveys, training evaluations, incident reports, and documentation of satisfaction at follow-up of service, as appropriate.*

#### **Evidence of Compliance (VII.1.02)**

PRE-SITE

Provide data collection procedures. The team will review the Personnel Questionnaires, the Client Questionnaires, the Stakeholder Questionnaires, and the Affiliate Questionnaires.

ON-SITE

The team will interview the quality improvement director or equivalent.

- VII.1.03 At least every four years, the EAP conducts organization-wide, long-term planning which includes:**
- a. reviewing the EAP’s mission, values, and mandates, and making revisions, as necessary;**

- b. **establishing goals and objectives that flow from its mission and mandated responsibilities;**
- c. **assessing its strengths and weaknesses;**
- d. **assessing human resource needs; and**
- e. **identifying and formulating strategies for meeting identified goals.**

**Evidence of Compliance (VII.1.03)**

PRE-SITE

Provide the current long-term plan and board of directors' meeting minutes that address review of the long-term plan. The team will review evidence provided for II.1.01.

ON-SITE

The team will interview the chief executive officer or his/her designee, and as applicable, members of the board of directors.

- VII.1.04        The EAP develops a short-term plan that supports the goals and objectives of its long-term plan and evaluates its progress toward achieving short-term goals and objectives at least quarterly.**

**Evidence of Compliance (VII.1.04)**

PRE-SITE

Provide the short-term plan.

ON-SITE

The team will interview the chief executive officer or his/her designee, and the quality improvement director or equivalent.

**VII.2            EVALUATION OF PERFORMANCE\*\***

- VII.2.01        The EAP evaluates its systems, procedures, and outcomes on an ongoing basis and uses the results to continuously improve performance.**

***Interpretation (VII.2.01):***

*The EAP must take action based on the quality improvement findings to build on strengths, eliminate or reduce identified problems, determine possible causes when data reveal issues of concern, promulgate solutions and replicate good practice, and implement and monitor the effectiveness of corrective action plans, when indicated.*

**Evidence of Compliance (VII.2.01)**

PRE-SITE

Provide documentation that the required evaluation is occurring in each service offered. Provide a description or other documentation of how results are used to improve performance. The team will review evidence provided for VII.9 Corrective Action.

ON-SITE

The team will interview the chief executive officer or his/her designee, and the quality improvement director or equivalent.

- VII.2.02        The EAP collects and analyzes demographic data on clients and is able to generate customer profiles according to the following parameters:**
- a. **service provided;**
  - b. **length of service;**
  - c. **gender;**

- d. age;
- e. job classification;
- f. religious affiliation, as appropriate to the EAP;
- g. racial/ethnic composition, as appropriate to the EAP; and
- h. amount the customer has paid per employee (for external programs only).

***Interpretation (VII.2.02):***

*The customer profile generated as per the requirements of this standard may be included in the reports described in standard VI.5.01.*

**Evidence of Compliance (VII.2.02)**

PRE-SITE

Provide a sample of five customer profiles.

- VII.2.03      The EAP has a system in place to evaluate:**
- a. the rate at which calls on the EAP's toll-free service access line are answered; and
  - b. telephone call abandonment rates.

**Evidence of Compliance (VII.2.03)**

ON-SITE

The team will interview the program director and review EAP telephone logs and records.

- VII.2.04      The EAP evaluates the effectiveness of each host or customer organization's Drug Free Workplace program.**

**Evidence of Compliance (VII.2.04)**

PRE-SITE

Provide evaluation procedures and three sample evaluations.

- NA              The EAP does not offer Drug Free Workplace services.**

- VII.2.05      An EAP that purchases training for supervisors, work-life, organizational development, or other services from subcontracting organizations has systems to monitor, evaluate, and improve each of those contracted services.**

**Evidence of Compliance (VII.2.05)**

PRE-SITE

Provide procedures for monitoring, evaluating, and improving purchased services.

ON-SITE

The team will interview the chief executive officer or his/her designee, and the quality improvement director or equivalent.

- NA              The EAP does not purchase services from a subcontractor.**

- VII.2.06      The EAP evaluates referral resources on an on-going basis to assess the safety, quality, and effectiveness of services provided.**

***Interpretation (VII.2.06):***

*Such evaluations may be conducted through site visits or investigations of the referral's reputation among its customers.*

### **Evidence of Compliance (VII.2.06)**

PRE-SITE

Provide procedures for evaluating referral resources.

ON-SITE

The team will interview the chief executive officer or his/her designee, and the quality improvement director or equivalent.

## **VII.3 INTERNAL QUALITY MONITORING\*\***

**VII.3.01 The EAP collects data on each service it provides and integrates findings into its overall quality improvement system, which may include, but not be limited to:**

- a. training to supervisors and union representatives;**
- b. work-life;**
- c. critical incident stress management;**
- d. legal services;**
- e. short-term counseling; and**
- f. assessment and referral.**

### **Evidence of Compliance (VII.3.01)**

PRE-SITE

Provide procedures and data collection tools related to the standard.

ON-SITE

The team will interview the quality improvement director or equivalent.

**VII.3.02 The EAP documents quarterly reviews of a statistically significant number of randomly selected open and recently closed client records, comprising at least five percent of the staff member cases per quarter, to evaluate:**

- a. the quality of assessments;**
- b. case or service planning;**
- c. services provided or obtained;**
- d. the results of the service; and**
- e. aftercare planning.**

### ***Interpretation (VII.3.02):***

*The client record review should be performed using a tool that specifies these and other indicators used.*

### **Evidence of Compliance (VII.3.02)**

PRE-SITE

Provide record review procedures including data collection tools.

ON-SITE

The team will interview the quality improvement director or equivalent.

**VII.3.03 The quarterly internal client record reviews are:**

- a. conducted so that counselors and supervisors do not review cases in which they have been directly involved; and**
- b. distinct from periodic case review in which the counselor and supervisor review the client's progress towards achieving his/her service goals.**

### **Evidence of Compliance (VII.3.03)**

PRE-SITE

The team will review the client record review procedures provided for VII.3.02.

ON-SITE

The team will interview the quality improvement director or equivalent.

- VII.3.04        The EAP annually reviews potential areas of liability and assesses areas of overall risk to the EAP, including, but not limited to:**
- a.   research involving program participants, as applicable; and**
  - b.   compliance with legal requirements including licensing.**

**Evidence of Compliance (VII.3.04)**

PRE-SITE

Provide procedures for reviewing areas of liability; provide reports from the last two reviews.

ON-SITE

The team will interview the chief executive officer or his/her designee, and the quality improvement director or equivalent.

- VII.3.05        At least quarterly, the EAP conducts a review of all grievances and incidents involving customer organizations and their employees, personnel, and affiliates, which includes a review of environmental risks.**

***Interpretation (VII.3.05):***

*Aggregated data on grievances and incidents are made available to the account managers and senior management or their designees.*

**Evidence of Compliance (VII.3.05)**

PRE-SITE

Provide procedures for conducting quarterly reviews of grievances and incidents; provide reports for the last two quarters that summarize the EAP's review of grievances and incidents. The team will review the Affiliate Questionnaires and the Personnel Questionnaires.

ON-SITE

The team will interview the chief executive officer or his/her designee, and the quality improvement director or equivalent.

- VII.3.06        The EAP integrates the findings of external review processes including audits, accreditation activities, licensing, and other reviews into its quality improvement process.**

**Evidence of Compliance (VII.3.06)**

PRE-SITE

Provide a list of external review processes and a description of how findings are integrated into the overall quality improvement process; indicate personnel responsible for the various components; provide copies of reports and summary results of such processes.

- VII.3.07        The EAP integrates the findings and recommendations of annual summaries and periodic reports developed for host or customer organizations into its quality improvement processes.**

**Evidence of Compliance (VII.3.07)**

PRE-SITE

The team will review evidence provided for section VI.5 Reports to Customer Organizations.

ON-SITE

The team will interview the quality improvement director or equivalent.

## **VII.4 EXTERNAL AUDITS\*\***

**NA** The EAP is not subject to third-party audits.

**VII.4.01** **The EAP complies with all host or customer organization requests for third-party audits as stipulated in contractual agreements.**

### **Evidence of Compliance (VII.4.01)**

PRE-SITE

Provide procedures or other documentation regarding third-party audits. The team will review evidence provided for VI.2.03 (e).

ON-SITE

The team will interview the quality improvement director or equivalent.

**VII.4.02** **The EAP and host or customer organization mutually agree on the scope of third-party audits in advance, and audits are restricted to this predetermined scope.**

### **Evidence of Compliance (VII.4.02)**

PRE-SITE

Provide procedures or other documentation regarding third-party audits.

ON-SITE

The team will interview the quality improvement director or equivalent.

**VII.4.03** **The third-party audit firm and/or its designated auditor are independent of the host or customer organization and the EAP.**

### **Evidence Compliance (VII.4.03)**

PRE-SITE

Provide procedures or other documentation regarding third-party audits.

ON-SITE

The team will interview the quality improvement director or equivalent.

**VII.4.04** **The EAP conforms to third-party auditing procedures when it permits components of files or records to be copied or removed from audited sites.**

**Note:** Under United States federal regulations, bona fide audits, inspections, and evaluations are allowed without prior consent. Other federal legislation needs to be stated from other countries served. Records may be copied for audit purposes.

### **Evidence of Compliance (VII.4.04)**

PRE-SITE

Provide procedures or other documentation regarding third-party audits.

ON-SITE

The team will interview the quality improvement director or equivalent.

**VII.4.05** **A third-party audit firm signs non-disclosure and confidentiality agreements to protect the EAP's intellectual property.**

### **Evidence of Compliance (VII.4.05)**

PRE-SITE

Provide procedures or other documentation regarding third-party audits.

ON-SITE

The team will interview the quality improvement director or equivalent, and review signed confidentiality agreements.

## **VII.5 OUTCOMES MEASUREMENT\*\***

**VII.5.01 In each of its programs, and on an ongoing basis, the EAP measures service outcomes for all clients, including:**

- a. individual client satisfaction with all services received;**
- b. level of functioning; and**
- c. level of achievement for goal of assessed problem or request for service.**

### ***Interpretation (VII.5.01):***

*All services include, but are not limited to, assessment and referral, information and referral, short-term counseling, CISM, and work-life. The compilation of such data may be done independently or through a consultant.*

### **Evidence of Compliance (VII.5.01)**

PRE-SITE

Provide outcome evaluation procedures. The team will review the Outcomes Reporting Form and the Client Questionnaires.

ON-SITE

The team will interview the quality improvement director or equivalent.

**VII.5.02 EAP counselors give a satisfaction questionnaire to each client after the first session in all services.**

### **Evidence of Compliance (VII.5.02)**

PRE-SITE

The team will review Client Questionnaires.

ON-SITE

The team will interview the quality improvement director or equivalent, and clients when permissible.

**VII.5.03 For its clinical services, the EAP collects and analyzes client self-reported outcomes and counselor-reported outcomes toward achieving the service goals established at the first session.**

### ***Interpretation (VII.5.03):***

*According to this standard, goals may be addressed in the following domains: cognitive, behavioral, and emotional dimensions that enhance the client's ability to cope with occupational, social, psychological, and interpersonal problems.*

### **Evidence of Compliance (VII.5.03)**

PRE-SITE

Provide outcomes measurement procedures and other relevant documentation, including measurement tools.

ON-SITE

The team will interview the quality improvement director or equivalent.

**VII.5.04 For its clinical services, the EAP uses standardized measurement tools at intake and at follow-up to evaluate improvements in client functioning.**

***Interpretation (VII.5.04):***

*An example of such a measurement tool is the Global Assessment of Functioning (GAF) scale, which is available for clinical work in the United States.*

**Evidence of Compliance (VII.5.04)**

PRE-SITE

The team will review the outcomes measurement procedures and measurement tools.

ON-SITE

The team will interview the quality improvement director or equivalent.

**VII.5.05 After each episode of training or consultation, the EAP surveys the service recipient to evaluate the impact of the training or consultation on his/her ability to handle a situation or situations in the workplace that the training or consultation was intended to address.**

**Evidence of Compliance (VII.5.05)**

PRE-SITE

Provide sample evaluation material.

**VII.6 QUALITY IMPROVEMENT WITH AFFILIATES\*\***

**NA** The EAP does not use affiliates.

**VII.6.01 An EAP that purchases services from affiliates monitors and evaluates those contracted services and implements corrective action, if necessary.**

**Evidence of Compliance (VII.6.01)**

PRE-SITE

Provide procedures for monitoring, evaluating, and improving services purchased from affiliates.

ON-SITE

The team will interview the chief executive officer or his/her designee, and/or the quality improvement director or equivalent.

**VII.6.02 The EAP conducts random annual site reviews of a five percent sample of affiliates to review the following:**

- a. appropriateness of clinical protocol and procedures, as addressed in VII.3.02;**
- b. safety of physical facilities; and**
- c. compliance with EAP contract requirements.**

**Evidence of Compliance (VII.6.02)**

PRE-SITE

Provide procedures for monitoring, evaluating, and improving services purchased from affiliates.

ON-SITE

The team will interview the chief executive officer or his/her designee, and/or the quality improvement director or equivalent.

- VII.6.03** In the five percent sample of affiliates reviewed in VII.6.02, the EAP also evaluates:
- a. attainment of the requisite credentials required of affiliates assuming different roles, e.g., assessment and referral, information and referral, and short-term counseling;
  - b. possession of current licensure, certification, or registration; and
  - c. attainment of ongoing training requirements set forth in the contract.

**Evidence of Compliance (VII.6.03)**

**PRE-SITE**

The team will review procedures for monitoring, evaluating, and improving services purchased from affiliates.

## **VII.7 FEEDBACK MECHANISMS**

- VII.7.01** At least annually, the EAP:
- a. shares findings from its quality improvement processes with personnel, clients, and other stakeholders; and
  - b. submits summary results of its planning and evaluation processes to the owners/senior management or board of directors, as applicable.

**Evidence of Compliance (VII.7.01)**

**PRE-SITE**

Provide procedures and other material for sharing findings from the quality improvement process; include the annual report or summary reports. The team will review the Stakeholder Questionnaires.

**ON-SITE**

The team will interview the quality improvement director or equivalent.

- VII.7.02** Data from outcomes measurement and other quality improvement processes are distributed in a timeframe and form that are useful to all relevant staff.

**Evidence of Compliance (VII.7.02)**

**PRE-SITE**

Provide procedures or other material describing the distribution of data to staff.

**ON-SITE**

The team will interview staff.

## **VII.8 INFORMATION MANAGEMENT**

- VII.8.01** The EAP has a management information system that is capable of supporting its operations, planning, and evaluation activities.

**Evidence of Compliance (VII.8.01)**

**PRE-SITE**

Provide a description of the management information system, including procedures for its use.

**ON-SITE**

The team will interview the person with overall responsibility for the organization's information management, and relevant personnel.

- VII.8.02** The EAP's management information system:

- a. protects confidentiality; and
- b. enables timely, and rapid access to information.

***Interpretation (VII.8.02):***

*The management information system is capable of providing information without delay in emergency or crisis situations and within a timeframe that supports, rather than hinders, organizational decision-making and routine service-delivery functions.*

**Evidence of Compliance (VII.8.02)**

ON-SITE

The team will interview the person responsible for information management who will provide a demonstration of the system.

- VII.8.03      The EAP maintains a disaster recovery and back-up plan for all information systems that is designed to bring these services back into operation as quickly as possible following an interruption in service, and this system is tested at least once per year.**

***Interpretation (VII.8.03):***

*The EAP must maintain a back-up power supply or alternate system for phones and information management systems.*

**Evidence of Compliance (VII.8.03)**

PRE-SITE

Provide the disaster recovery plan.

ON-SITE

The team will observe the components of the plan.

- VII.8.04      The EAP has systems that maintain data capture methods for the following types of information:**
- a. client identification;
  - b. demographic and work data;
  - c. referral source;
  - d. presenting and assessed problems;
  - e. resolution of problems;
  - f. completion or termination of service;
  - g. other statistical data relevant to the quarterly and annual reports; and
  - h. outcomes measurement for services sought by clients.

**Evidence of Compliance (VII.8.04)**

ON-SITE

The team will review the data system.

**VII.9            CORRECTIVE ACTION\***

- VII.9.01      The EAP takes action based on the findings of its quality improvement processes to:**
- a. build on strengths;
  - b. eliminate or reduce identified problems;
  - c. determine possible causes when data reveal issues of concern;
  - d. promulgate solutions and replicate good practice; and

- e. **implement and monitor the effectiveness of corrective action plans, when indicated.**

**Evidence of Compliance (VII.9.01)**

**PRE-SITE**

The team will review reports or minutes from risk management and/or quality improvement committees or teams, reports from quarterly record reviews, client satisfaction surveys, board of directors' minutes, and other documentation for evidence that corrective action was taken in response to identified problems or issues. The team will review the Personnel Questionnaires and the Affiliate Questionnaires.

**ON-SITE**

The team will interview the chief executive officer or his/her designee, and/or the quality improvement director or equivalent.

**VII.9.02      The EAP revises policies and/or operational procedures, personnel assignments, personnel training, contracts, and services according to the recommendations of its quality improvement processes.**

**Evidence of Compliance (VII.9.02)**

**PRE-SITE**

The team will review the evidence that is provided for VII.9.01.

**ON-SITE**

The team will interview the chief executive officer or his/her designee, and/or the quality improvement director or equivalent.

## **VIII. PERSONNEL AND AFFILIATE COMPETENCE**

- VIII.1 Competence of Counselors
- VIII.2 Credential Requirements\*\*
- VIII.3 Competence of Affiliates\*\*
- VIII.4 Additional Credential Requirements

## VIII. PERSONNEL AND AFFILIATE COMPETENCE

### VIII.1 COMPETENCE OF COUNSELORS

**VIII.1.01 EAP counselors have specialized training and demonstrated competence in all areas of EAP practice in which they are active.**

**Evidence of Compliance (VIII.1.01)**

PRE-SITE

Provide relevant job descriptions.

ON-SITE

The team will interview human resources personnel and review personnel records.

**VIII.1.02 Counselors possess knowledge and experience in the following areas:**

- a. family and relationship counseling;**
- b. addiction counseling;**
- c. short-term counseling, as applicable;**
- d. use of all clinical measurement tools, as appropriate to the service provided; and**
- e. instruction in assessment and referral.**

**Evidence of Compliance (VIII.1.02)**

ON-SITE

The team will review job descriptions or training records, as applicable.

**VIII.1.03 All EAP counselors and their supervisors keep abreast of relevant regulatory and legislative developments.**

**Evidence of Compliance (VIII.1.03)**

PRE-SITE

Provide job descriptions or the section of the personnel manual that states the expectation that counseling and management staff keep abreast of relevant regulatory and legislative developments.

ON-SITE

The team will interview human resources personnel.

### VIII.2 CREDENTIAL REQUIREMENTS\*\*

**VIII.2.01 The chief executive officer or his/her designee is qualified by:**

- a. an advanced degree from an accredited college or university;**
- b. at least five years of management experience;**
- c. assessed competence in administering and providing EAP services; and**
- d. management skills in addressing human resources and financial matters.**

**Evidence of Compliance (VIII.2.01)**

PRE-SITE

Provide the chief executive officer or his/her designee's résumé and job description. The team will review the List of Personnel.

ON-SITE

The team will interview the chief executive officer or his/her designee, and personnel.

- VIII.2.02 The EAP clinical director is qualified by:**
- a. an advanced degree from an accredited college or university in a field related to EAP services;
  - b. appropriate state or provincial licensure, certification, or registration;
  - c. at least two years of post-graduate experience in clinical services; and
  - d. assessed competence in administering and providing EAP services.

**Evidence of Compliance (VIII.2.02)**

PRE-SITE

Provide the clinical director's résumé and job description. The team will review the List of Personnel.

ON-SITE

The team will interview the clinical director and personnel.

- VIII.2.03 Assessment and referral, and short-term counseling personnel have at least the following qualifications:**
- a. the terminal degree in a mental health profession (terminal degrees include an MSW, an MS in nursing, or a PhD in psychology);
  - b. appropriate state or provincial licensure, certification, or registration; and
  - c. training and experience in alcoholism/substance abuse treatment.

***Interpretation (VIII.2.03):***

*This applies to services provided through all mediums, including face-to-face, telephone, and online services.*

**Evidence of Compliance (VIII.2.03)**

PRE-SITE

Provide relevant job descriptions. The team will review the List of Personnel.

ON-SITE

The team will interview human resources personnel and review personnel records.

- VIII.2.04 Assessment and referral, and short-term counseling personnel possess at least two of the following:**
- a. training and experience in organizational dynamics;
  - b. CEAP designation;
  - c. at least 2,500 hours post-master's degree clinical experience;
  - d. two years of EAP experience in a management or direct service role; or
  - e. a completed master's level internship in an EAP setting.

**Evidence of Compliance (VIII.2.04)**

PRE-SITE

Provide relevant job descriptions.

ON-SITE

The team will interview human resources personnel and review personnel records.

- VIII.2.05 Information and referral, and intake staff possess at least a master's degree in a mental health profession and at least one year of clinical practicum in social work, psychology, or another mental health profession.**

**Evidence of Compliance (VIII.2.05)**

PRE-SITE

Provide relevant job descriptions. The team will review the List of Personnel.

ON-SITE

The team will interview human resources personnel and review personnel records.

**VIII.2.06 EAP counselors who are working toward practice requirements for licensure or certification are supervised as per state, provincial, or professional licensure registration requirements.**

**Evidence of Compliance (VIII.2.06)**

ON-SITE

The team will interview the clinical or program director.

NA The EAP hires licensed EAP counselors only.

**VIII.3 COMPETENCE OF AFFILIATES\*\***

**Note:** In the event that a substantial number of affiliates provide services in remote areas, the EAP should provide evidence that they have made a good faith effort to identify the most qualified individuals to provide services.

NA The EAP does not use affiliates.

**VIII.3.01 All affiliates have specialized training and demonstrated competence in all areas of EAP practice in which they are active.**

**Evidence of Compliance (VIII.3.01)**

PRE-SITE

Provide relevant job descriptions.

ON-SITE

The team will interview human resources personnel and review relevant contracts.

- VIII.3.02 Criteria for selection of affiliates require:**
- a. demonstrated competence in specialized areas, including those listed in VIII.1.02;**
  - b. ongoing attainment of state or provincially required professional development hours (PDHs), continuing education units (CEUs), or other professionally required training; and**
  - c. attainment of the training content addressed in section IX.4.**

**Evidence of Compliance (VIII.3.02)**

ON-SITE

The team will interview human resources personnel and review relevant contracts.

- VIII.3.03 Affiliates that provide assessment and referral, and short-term counseling have at least the following qualifications:**
- a. the terminal degree in a mental health profession (terminal degrees include an MSW, an MS in nursing, or a PhD in psychology);**
  - b. appropriate state or provincial licensure, certification, or registration; and**

**c. training and experience in alcoholism/substance abuse treatment.**

***Interpretation (VIII.3.03):***

*This applies to services provided through all mediums, including face-to-face, telephone, and online services.*

**Evidence of Compliance (VIII.3.03)**

PRE-SITE

Provide relevant job descriptions.

ON-SITE

The team will interview human resources personnel and review relevant contracts.

**VIII.3.04 Affiliates that provide assessment and referral, and short-term counseling possess at least two of the following:**

- a. training and experience in organizational dynamics;**
- b. CEAP designation;**
- c. at least 2,500 hours post-master's degree clinical experience;**
- d. two years of EAP experience in a management or direct service role; or**
- e. a completed master's level internship in an EAP setting.**

**Evidence of Compliance (VIII.3.04)**

PRE-SITE

Provide relevant job descriptions.

ON-SITE

The team will interview human resources personnel and review relevant contracts.

**VIII.3.05 Affiliates that provide information and referral and intake services possess at least a master's degree in a mental health profession and at least one year of clinical practicum in social work, psychology, or another mental health profession.**

**Evidence of Compliance (VIII.3.05)**

PRE-SITE

Provide relevant job descriptions.

ON-SITE

The team will interview human resources personnel and review relevant contracts.

**VIII.3.06 In addition to the other requirements in this section, affiliates work in a clinical practice for a minimum of 10 hours per week.**

**Evidence of Compliance (VIII.3.06)**

ON-SITE

The team will review a sample of affiliate contracts.

**VIII.4 ADDITIONAL CREDENTIAL REQUIREMENTS**

**Note:** This section applies to staff, affiliates, and subcontractors. Please reference II.4 "Recruitment and Selection Practices" for additional information related to the standards in this section.

**VIII.4.01 All EAP interns are in training at the undergraduate or graduate level and are**

**closely supervised by licensed or certified practitioners.**

**Evidence of Compliance (VIII.4.01)**

ON-SITE

The team will interview the fieldwork supervisor.

NA                    The EAP does not use interns.

**VIII.4.02            Supervisors are qualified by additional training in supervision, and at least two years of supervised post-graduate experience in counseling.**

***Interpretation (VIII.4.02):***

*Supervisors that are administration or management specialists by training/education may have post-graduate experience that is non-clinical in nature.*

**Evidence of Compliance (VIII.4.02)**

PRE-SITE

The team will review job descriptions of supervisors.

ON-SITE

The team will interview the clinical or program director.

**VIII.4.03            Staff members and affiliates who provide management and human resource consultation possess a master's degree in a behavioral healthcare field with certification in human resource management and/or an approved EAP training program.**

***Interpretation (VIII.4.03):***

*For EAPs that use subcontractors or affiliates to provide work-life services, the EAP would include these qualifications as part of the contract and verify compliance through review of V.6.04 and VII.6.02.*

**Evidence of Compliance (VIII.4.03)**

PRE-SITE

Provide relevant job descriptions or contractor criteria. The team will review the List of Personnel.

ON-SITE

The team will review personnel and affiliate records or relevant contracts.

**VIII.4.04            EAP staff members and affiliates who provide Drug Free Workplace assessments possess master's degrees, licensure, and a minimum of three years' experience in a chemical dependency treatment program.**

**Evidence of Compliance (VIII.4.04)**

PRE-SITE

Provide relevant job descriptions. The team will review the List of Personnel.

ON-SITE

The team will interview human resources personnel and review personnel records or relevant contracts.

NA                    The EAP does not provide Drug Free Workplace assessments.

**VIII.4.05            EAP staff members providing work-life services possess:**  
**a. a minimum of a bachelor's degree;**  
**b. specific expertise and training in the relevant field; and**

- c. a minimum of 10 hours of training on appropriate intake and case management procedures.**

***Interpretation (VIII.4.05):***

*For EAPs that use subcontractors or affiliates to provide work-life services, the EAP would include these qualifications as part of the contract and verify compliance through review of V.6.04 and VII.6.02.*

**Evidence of Compliance (VIII.4.05)**

PRE-SITE

Provide relevant job descriptions. The team will review the List of Personnel.

ON-SITE

The team will review staff and affiliate records or relevant contracts.

NA                    The EAP does not provide work-life services.

**VIII.4.06            Work-life supervisors possess:**

- a. a master's degree in a related field; or**
- b. a bachelor's degree with a minimum of seven years' related experience.**

***Interpretation (VIII.4.06):***

*For EAPs that use subcontractors or affiliates to provide work-life services, the EAP would include these qualifications as part of the contract and verify compliance through review of V.6.04 and VII.6.02.*

**Evidence of Compliance (VIII.4.06)**

PRE-SITE

Provide relevant job descriptions. The team will review the List of Personnel.

ON-SITE

The team will review staff and affiliate records or relevant contracts.

NA                    The EAP does not provide work-life services.

## **IX. STAFF SUPERVISION AND TRAINING**

- IX.1 Consultation with Staff and Affiliates\*\*
- IX.2 Supervision of Non-Clinical Personnel\*\*
- IX.3 General Staff Training and Development Requirements\*\*
- IX.4 Training Content\*
- IX.5 Risk Management Training

## IX. STAFF SUPERVISION AND TRAINING

### IX.1 CONSULTATION WITH STAFF AND AFFILIATES\*\*

#### *Interpretation (IX.1):*

*For purposes of these standards “supervision” can be used interchangeably with “consultation” as it occurs with staff (versus affiliates).*

- IX.1.01 EAP consultation emphasizes:**
- a. clients’ progress toward achieving goals and objectives;**
  - b. the safety and well-being of the client; and**
  - c. the quality of documentation in client records.**

#### **Evidence of Compliance (IX.1.01)**

##### PRE-SITE

The team will review the Personnel Questionnaires and the Affiliate Questionnaires.

##### ON-SITE

The team will interview the clinical or program director and review records.

- IX.1.02 Consultation is documented in the client’s record and includes the supervisor’s signature.**

#### *Interpretation (IX.1.02):*

*Supervision and/or consultation primarily address the elements outlined in IX.1.01. Issues related the quality of the work performed by staff and/or affiliates should be documented in the personnel or affiliate file or in separate files maintained by the supervisor, not in the client record.*

#### **Evidence of Compliance (IX.1.02)**

##### ON-SITE

The team will review client records.

- IX.1.03 EAP staff and affiliates immediately report all critical incidents and cases which are potentially threatening to the client, the host or customer organization, or the EAP, and as part of consultation critical incidents are reviewed and information is documented.**

#### **Evidence of Compliance (IX.1.03)**

##### PRE-SITE

Provide critical incident procedures. The team will review evidence provided for VII.3.05.

##### ON-SITE

The team will interview staff and review the incident log.

- IX.1.04 EAP procedures, or contract provisions with affiliates, address the frequency of consultation for staff members and affiliates.**

#### **Evidence of Compliance (IX.1.04)**

PRE-SITE

Provide consultation procedures or related contract provisions for affiliates. The team will review the Personnel Questionnaires and the Affiliate Questionnaires.

ON-SITE

The team will interview supervisors.

**IX.1.05**

**Consultation with EAP staff and affiliates occurs as follows:**

- a. staff and affiliates who have less than three years of EAP experience have at least one hour of individual consultation for every 60 client contact hours;**
- b. staff and affiliates with more than three years of experience have at least one half hour of consultation for every 90 client contact hours; and**
- c. staff and affiliates in diverse geographical locations have at least one hour of consultation for every 90 client contact hours.**

***Interpretation (IX.1.05):***

*Consultation can be provided by telephone or through written or electronic contact.*

**Evidence of Compliance (IX.1.05)**

PRE-SITE

Provide consultation procedures or related contract provisions for affiliates. The team will review the Personnel Questionnaires and the Affiliate Questionnaires.

ON-SITE

The team will interview relevant staff and affiliates, and the clinical or program director.

**IX.1.06**

**EAP staff members who provide work-life services receive a minimum of two hours of individual or group consultation per month.**

***Interpretation (IX.1.06):***

*For EAPs that use subcontractors or affiliates to provide work-life services, the EAP would include these qualifications as part of the contract and verify compliance through review of V.6.04 and VII.6.02.*

**Evidence of Compliance (IX.1.06)**

PRE-SITE

Provide relevant job descriptions. The team will review the Personnel Questionnaires.

ON-SITE

The team will review staff and affiliate records or relevant contracts.

NA

The EAP does not provide work-life services.

**IX.1.07**

**Consultation with staff and affiliates may occur electronically via the following mechanisms:**

- a. email, provided that no identifying client data are exchanged; and**
- b. website, provided that password protections exist, modes of transmission are secure, and the site communicates that confidential information is being transmitted.**

**Evidence of Compliance (IX.1.07)**

PRE-SITE

Provide procedures for conducting telephone or electronic consultation with affiliates.

ON-SITE

The team will interview affiliates.

NA The EAP does not conduct electronic consultation with staff and affiliates.

## **IX.2 SUPERVISION OF NON-CLINICAL PERSONNEL\*\***

- IX.2.01 Face-to-face supervision of non-clinical staff occurs:**
- a. at least quarterly for account managers and other non-clinical personnel, including off-site personnel; and
  - b. at least monthly for telephone receptionists.

***Interpretation (IX.2.01):***

*The EAP monitors and evaluates how non-clinical staff members interact with clients, and provides them with suggestions for improvement during supervision.*

**Evidence of Compliance (IX.2.01)**

PRE-SITE

Provide procedures for supervising non-clinical staff.

ON-SITE

The team will interview supervisors.

- IX.2.02 Supervision of account managers emphasizes the manager's ability to implement, monitor, and effectively coordinate EAP services.**

**Evidence of Compliance (IX.2.02)**

PRE-SITE

Provide procedures for supervising non-clinical staff.

ON-SITE

The team will interview account managers and their supervisors.

## **IX.3 GENERAL STAFF TRAINING AND DEVELOPMENT REQUIREMENTS\*\***

- IX.3.01 All EAP personnel receive orientation to the EAP within 90 days of beginning work, and orientation is documented in the staff member's personnel record.**

**Evidence of Compliance (IX.3.01)**

PRE-SITE

The team will review the Personnel Questionnaires.

ON-SITE

The team will interview human resources personnel and review personnel records.

- IX.3.02 The EAP orients all new personnel to:**
- a. its mission, philosophy, and goals;
  - b. its services, policies, and procedures;
  - c. an organizational chart that delineates lines of accountability and authority at all levels of the EAP;
  - d. the cultural and socioeconomic characteristics of the service population; and
  - e. the EAP's relationship with other community resources.

**Evidence of Compliance (IX.3.02)**

PRE-SITE

Provide the table of contents for the EAP's orientation curriculum. The team will review the Personnel Questionnaires.

ON-SITE

The team will interview staff responsible for orientation and will review attendance records.

- IX.3.03            The EAP establishes a training and development program for counselors that is designed to:**
- a. improve their knowledge, skills, and abilities as they relate to the EAP field; and**
  - b. be aware of, and sensitive to, the diverse backgrounds and needs of clients.**

***Interpretation (IX.3.03):***

*Training may address a variety of topics including: customer service, crisis intervention, brief therapy modalities, managed care, critical incident stress management, work-life programs, the impact of mental illness and substance abuse, work performance assessments, human resource management, culturally competent clinical practice, management information systems, legal practices, and other relevant topics.*

**Evidence of Compliance (IX.3.03)**

PRE-SITE

Provide a description of the training and development program, including curricula. The team will review the Personnel Questionnaires.

ON-SITE

The team will interview the person responsible for training and development, and review personnel records.

- IX.3.04            Each year, EAP counseling professionals complete required state or provincial professional development hours (PDHs), continuing education units (CEU), or their equivalent.**

***Interpretation (IX.3.04):***

*Such requirements are completed at accredited colleges/universities, other state or provincially licensed institutions, or at EASNA, EAPA, or CEAP-sponsored courses.*

**Evidence of Compliance (IX.3.04)**

PRE-SITE

Provide documentation of training expectations for staff.

ON-SITE

The team will review training records.

- IX.3.05            Non-clinical staff complete a minimum of two hours of in-service training per year.**

**Evidence of Compliance (IX.3.05)**

PRE-SITE

Provide a list of training requirements for non-clinical staff, curricula, training schedules, and attendance sheets.

ON-SITE

The team will interview non-clinical staff and review personnel records.

- IX.3.06            Telephone receptionists receive training from the clinical and/or program director about the EAP's service delivery system.**

**Evidence of Compliance (IX.3.06)**

PRE-SITE

Provide material related to training telephone receptionists.

ON-SITE

The team will interview relevant staff and the clinical and/or program director.

**IX.3.07 Training for staff members is documented and such documentation includes:**

- a. the attendee's name;
- b. title of subject;
- c. number of hours;
- d. date of training; and
- e. the presenter's name and credentials.

**Evidence of Compliance (IX.3.07)**

ON-SITE

The team will review the training records.

**IX.4 TRAINING CONTENT\***

**IX.4.01 Counselors receive training within the first three months of employment on the following:**

- a. EAP core technology and the optional EAP services;
- b. EAP theory and practice; and
- c. the application of counseling skills in a workplace setting.

***Interpretation (IX.4.01):***

*In the event that training will not be offered for a time exceeding three months, the EAP must have a schedule of the upcoming trainings which staff will attend.*

**Evidence of Compliance (IX.4.01)**

PRE-SITE

Provide training material including curricula, training schedules, and attendance sheets.

ON-SITE

The team will review training records.

**IX.4.02 At least annually, EAP counselors receive training on current issues related to addictions and crisis intervention.**

***Interpretation (IX.4.02):***

*Counselors must receive at least one hour of annual retraining on new issues in addiction treatment.*

**Evidence of Compliance (IX.4.02)**

PRE-SITE

Provide training material including curricula, training schedules, and attendance sheets.

ON-SITE

The team will review training records.

**IX.4.03 Non-clinical administrative staff, such as account managers, receive training on the following:**

- a. EAP models of service delivery;
- b. essential components of EAPs;
- c. prevention practices;
- d. outreach; and
- e. training techniques for managers, supervisors, and union representatives.

**Evidence of Compliance (IX.4.03)**

PRE-SITE

Provide training material including curricula, training schedules, and attendance sheets.

ON-SITE

The team will review training records.

**IX.4.04 EAP staff members receive training on ethical issues, client rights, and ways to protect those rights.**

**Evidence of Compliance (IX.4.04)**

PRE-SITE

Provide training material including curricula, training schedules, and attendance sheets.

ON-SITE

The team will review training records.

**IX.4.05 Telephone and online counselors receive special training on non face-to-face counseling techniques before providing such services.**

**Evidence of Compliance (IX.4.05)**

PRE-SITE

Provide training material including curricula, training schedules, and attendance sheets.

ON-SITE

The team will review training records.

NA The EAP does not provide telephone or on-line services.

**IX.5 RISK MANAGEMENT TRAINING**

- IX.5.01 Personnel receive training on legal responsibilities regarding:**
- a. mandated reporting, including identification of clinical indicators of suspected abuse and neglect, as applicable;
  - b. reportable criminal behavior, including criminal, acquaintance, and statutory rape; and
  - c. duty to warn.

**Evidence of Compliance (IX.5.01)**

PRE-SITE

Provide training material including curricula, training schedules, and attendance sheets.

ON-SITE

The team will review training records.

- IX.5.02 The EAP annually trains personnel on emergency response practices, including:**
- a. the ability to assess risk and safety of clients;
  - b. techniques for handling emergencies; and

- c. appropriate coordination with mental health, law enforcement, and other professionals.**

***Interpretation (IX.5.02):***

*The EAP should train personnel on all emergency response procedures described in III.4.01.*

**Evidence of Compliance (IX.5.02)**

**PRE-SITE**

Provide a table of contents for the training curriculum that outlines training contents, and a description of training methods.

**ON-SITE**

The team will review training curriculum and attendance records, and interview staff.

**IX.5.03**

**The EAP trains all counselors on the following:**

- a. techniques for de-escalating conflict;**
- b. personnel safety measures;**
- c. management of aggressive or out-of-control behavior; and**
- d. protocols for notifying family members, legal guardians, or other contacts in the case of emergencies.**

**Evidence of Compliance (IX.5.03)**

**PRE-SITE**

The team will review the table of contents for the training curriculum that is provided for IX.5.02.

**ON-SITE**

The team will review training curriculum and attendance records, and interview staff.

## **X. Professional Practice**

- X.1 Protection of Rights\*
- X.2 Access to Files and Records\*
- X.3 Grievance Procedures\*\*
- X.4 Confidentiality and Privacy Protections for Clients\*
- X.5 Releases\*
- X.6 Conduct of Staff and Affiliates\*\*
- X.7 Conflicts of Interest\*
- X.8 Research Policies and Procedures
- X.9 Ethical Considerations Related to Web-Based Services\*\*
- X.10 Ethical Considerations Related to the Use of Specific Technologies\*\*

## X. PROFESSIONAL PRACTICE

### X.1 PROTECTION OF RIGHTS\*

**X.1.01** All clients receive summary information about their rights and responsibilities through a Statement of Understanding that is:

- a. provided in writing;
- b. distributed and explained at the beginning of his/her initial appointment;
- c. available in the major languages of clients at host or customer organizations, including English;
- d. effectively and appropriately communicated to persons with special needs; and
- e. signed by the client.

***Interpretation (X.1.01):***

*For clients receiving telephone services, the EAP staff member should read the Statement of Understanding prior to service delivery to obtain the verbal confirmation of the client's understanding regarding his/her rights and responsibilities, and document this in the client's progress notes. Clients receiving online services should provide an electronic confirmation of their understanding.*

**Note:** If one or more elements of the standard are completely absent from EAP operations, then a rating of "4" must be assigned.

**Evidence of Compliance (X.1.01)**

**PRE-SITE**

Provide procedures for informing clients of their rights and responsibilities; the Statement of Understanding in English; and procedures for informing persons with special communication needs or language barriers of their rights and responsibilities. The team will review the Client Questionnaires.

**ON-SITE**

The team will interview counselors and review client records.

**X.1.02** The Statement of Understanding includes the following:

- a. eligibility criteria;
- b. financial terms;
- c. limitations to the EAP's confidentiality obligations; and
- d. the client's legal rights regarding EAP service use.

***Interpretation (X.1.02):***

*Please reference section X.4 "Confidentiality and Privacy Protections for Clients" in relation to (c) limitations to the EAP's confidentiality obligations.*

**Note:** If one or more elements of the standard are completely absent from EAP operations, then a rating of "4" must be assigned.

**Evidence of Compliance (X.1.02)**

**PRE-SITE**

The team will review the Statement of Understanding provided for X.1.01 and the Client Questionnaires.

ON-SITE

The team will review client records and interview counselors, and clients when permissible.

- X.1.03**            **The Statement of Understanding also describes the client’s rights and responsibilities including, but not limited to:**
- a. basic expectations for use of the EAP’s services;**
  - b. hours during which services are available; and**
  - c. the inclusion of clients, or as appropriate, his/her parent or legal guardian, in decisions regarding the services provided.**

**Evidence of Compliance (X.1.03)**

PRE-SITE

The team will review the Statement of Understanding provided for X.1.01 and the Client Questionnaires.

- X.1.04**            **The EAP follows a policy that addresses the client’s right to receive services in a way that does not stigmatize him/her or jeopardize his/her employment.**

**Evidence of Compliance (X.1.04)**

PRE-SITE

Provide the relevant policy.

- X.1.05**            **All clients have the right to be treated equitably and without favoritism, subject to limitations imposed by contractual obligations.**

**Evidence of Compliance (X.1.05)**

PRE-SITE

Provide non-discrimination policies and procedures. The team will review the Client Questionnaires.

ON-SITE

The team will interview staff, and clients when permissible.

- X.1.06**            **The EAP informs each client that if s/he uses a company computer, information transmitted may be tracked by the host or customer organization.**

***Interpretation (X.1.06):***

*This standard includes company computers used at the client’s home.*

**Evidence of Compliance (X.1.06)**

ON-SITE

The team will review client records.

**X.2                ACCESS TO FILES AND RECORDS\***

- X.2.01**            **The EAP informs each client at the beginning of service that a record is kept documenting all service contacts, including the date and time of each occurrence, and services provided.**

**Evidence of Compliance (X.2.01)**

ON-SITE

The team will review client records, and interview clients when permissible.

- X.2.02 Record access is limited to:**
- a. the client, or as appropriate, his/her parent or legal guardian;**
  - b. staff and affiliates authorized to see specific records on a “need to know” basis; and**
  - c. others outside of the EAP whose access to the information in the record is permitted by law or granted by the client.**

***Interpretation (X.2.02):***

*Records should not be left in public areas such as on carts in hallways, on desks, or in insecure areas. When not being used by authorized staff, files should be returned to a secure area.*

**Evidence of Compliance (X.2.02)**

PRE-SITE

Provide procedures regarding access to client records.

ON-SITE

The team will review client records and interview staff.

- X.2.03 Clients or their designated legal representatives receive instruction on how to access client records and such procedures are consistent with applicable rules, regulations, and laws, and the EAP’s professional judgment as to the clients’ best interest.**

**Evidence of Compliance (X.2.03)**

PRE-SITE

Provide client record access procedures.

ON-SITE

The team will interview staff, and clients when permissible.

- X.2.04 If the EAP determines that allowing a client to review his/her record would be harmful, and applicable law neither prohibits nor requires direct record access by the client, then:**
- a. senior management reviews, approves in writing, and enters into the client record the reasons for refusing to allow a client to review his/her record; and**
  - b. the EAP has procedures that permit a qualified professional to review the records on behalf of the client, provided that the professional signs a written statement that the information determined to be harmful will not be provided to the client.**

***Interpretation (X.2.04):***

*A person’s right to review his/her care or treatment may be denied or otherwise limited only in the most extreme circumstances where serious harm is likely to ensue. In such cases, objective criteria must guide decisions to deny access. In all cases, the EAP must operate in accord with applicable law.*

**Evidence of Compliance (X.2.04)**

PRE-SITE

Provide procedures addressing the denial of access by clients to their records.

ON-SITE

The team will review client records.

- X.2.05 Clients have the right to insert a statement into their records, and if personnel insert a statement in response, such statements are inserted with the knowledge of the client, and the client is given the opportunity to review such a response.**

**Evidence of Compliance (X.2.05)**

PRE-SITE

Provide procedures for including statements by clients in their records.

ON-SITE

The team will review client records.

- X.2.06**            **EAP administrators and staff, including auditors and third-party evaluators, are permitted access to EAP records for the purposes of:**
- a. program oversight, evaluation, and quality improvement;**
  - b. destroying EAP records at the end of their period of maintenance; and**
  - c. transferring EAP records from one affiliate to another.**

*Interpretation (X.2.06):*

*Confidentiality must be maintained during this process.*

**Evidence of Compliance (X.2.06)**

PRE-SITE

Provide procedures for access to client records and relevant sections of the EAP's confidentiality procedures.

ON-SITE

The team will interview relevant staff.

**X.3                    GRIEVANCE PROCEDURES\*\***

- X.3.01**            **Procedures provide clients with a formal mechanism for expressing and resolving complaints and grievances, and such procedures:**
- a. are given to all clients at the time of intake and upon request, or at the initiation of a grievance;**
  - b. include an appeals procedure;**
  - c. provide for a timely resolution of the matter; and**
  - d. require a written response to the aggrieved that includes documentation of the response in the client record.**

**Note:**            If one or more elements of the standard are completely absent from EAP operations, then a rating of "4" must be assigned.

**Evidence of Compliance (X.3.01)**

PRE-SITE

Provide grievance policies and procedures, and quarterly grievance reports for the last two years. The team will review the Client Questionnaires.

ON-SITE

The team will review records of grievance proceedings, and interview clients when permissible.

- X.3.02**            **Complaint mechanisms include procedures to inform the EAP's management and board of directors, if applicable, of problems with service provision or other matters of concern.**

**Evidence of Compliance (X.3.02)**

PRE-SITE

Provide copies of relevant procedures/mechanisms.

ON-SITE

The team will interview staff, and clients when permissible.

**X.3.03            The EAP makes summary data regarding complaints available to external auditors or reviewers, as requested.**

**Evidence of Compliance (X.3.03)**

PRE-SITE

Provide samples of summary data.

## **X.4                CONFIDENTIALITY AND PRIVACY PROTECTIONS FOR CLIENTS\***

**X.4.01            The EAP gives clients written information that describes the EAP's confidentiality procedures, and requires clients to sign a statement indicating their understanding of their confidentiality rights and any limitations.**

**Evidence of Compliance (X.4.01)**

PRE-SITE

Provide confidentiality procedures. The team will review the Client Questionnaires.

ON-SITE

The team will review client records and statements of understanding.

**X.4.02            Staff members, affiliates, consultants, auditors, temporary staff members, and student interns sign a confidentiality agreement specifying that they agree to uphold the EAP's confidentiality practices inside and outside of the EAP offices.**

**Evidence of Compliance (X.4.02)**

ON-SITE

The team will review signed confidentiality agreements.

**X.4.03            EAP procedures governing access to, use of, and release or disclosure of information about clients meet applicable legal requirements under federal and state or provincial law.**

**Evidence of Compliance (X.4.03)**

PRE-SITE

Provide policies and procedures governing access to, use of, and release of information.

ON-SITE

The team will interview staff, and clients when permissible.

**X.4.04            External EAPs use a billing format that protects client confidentiality.**

**Evidence of Compliance (X.4.04)**

PRE-SITE

Provide confidentiality procedures related to billing.

**NA                The EAP is internal.**

## **X.5 RELEASES\***

- X.5.01 The EAP obtains written consent to release information from a client when:**
- a. s/he is referred out of the EAP to enable the counselor to follow-up to assure the referral has been completed;**
  - b. s/he must be absent from work to participate in treatment or to be hospitalized;  
or**
  - c. there are any other circumstances that require communication by the EAP regarding a client's confidential information.**

***Interpretation (X.5.01):***

*All releases must meet requirements set forth in federal and state or provincial laws.*

**Evidence of Compliance (X.5.01)**

**PRE-SITE**

Provide consent procedures. The team will review the Client Questionnaires.

**ON-SITE**

The team will interview staff, and clients when permissible, and review signed consent forms.

- X.5.02 The EAP assumes a protective role regarding the disclosure of information about clients and has clearly stated procedures governing the disclosure of such information, including instances where the client may be dangerous to him/herself or others.**

***Interpretation (X.5.02):***

*The EAP's procedures must reconcile legal restrictions and requirements on the release of identifying information about clients with mandatory reporting requirements and the EAP's duty to warn a person who may be in danger. Procedures should include guidance to personnel for reporting a person who is suspected to be a danger to him/herself or the community.*

**Evidence of Compliance (X.5.02)**

**PRE-SITE**

Provide procedures for releasing information without written consent.

**ON-SITE**

The team will interview staff, and clients when permissible.

- X.5.03 When the EAP receives a request for the release of confidential information about a client, or the release of confidential information is necessary for the provision of services, prior to releasing such information, the EAP:**
- a. determines if the request is valid and in the best interest of the client;**
  - b. obtains the informed, written consent of the client; and**
  - c. if the person is an adult or minor who is incapable of providing informed consent, obtains consent from his/her parent or legal guardian.**

***Interpretation (X.5.03):***

*In the context of this standard, "valid" means justifiable, legitimate, convincing, legally permissible, and in the best interest of the client. Information should be released on a "need to know" or "need to access" basis and should be limited to portions of documents needed to answer a business, legal, or other legitimate inquiry. Consent is not necessary where the request is pursuant to a court order, audit, duty to warn, or emergency situation.*

### **Evidence of Compliance (X.5.03)**

PRE-SITE

Provide sample consent forms and procedures for obtaining and documenting informed consent.

ON-SITE

The team will interview the clinical or program director.

#### **X.5.04**

**Informed, written consent includes the following elements:**

- a. the signature of the person whose information will be released, or the parent or legal guardian of a person who is unable to provide informed consent;**
- b. the specific information to be released;**
- c. the purpose for which the information is to be used, except where disclosure is mandated by law or the client is receiving service under court supervision or directive;**
- d. the date the consent takes effect;**
- e. the date that the consent expires, not to exceed 90 days from the date consent is given for a one time release of information, or one year or as otherwise required by law when the release of information is required for ongoing service provision by a contracted or cooperating service provider;**
- f. the name of the person to whom the information is to be given;**
- g. the name of the EAP staff person who is providing the confidential information;**  
**and**
- h. a statement that the client may withdraw his/her consent at any time.**

#### ***Interpretation (X.5.04):***

*Blanket consent forms signed by clients when service is initiated do not meet the requirements of this standard.*

### **Evidence of Compliance (X.5.04)**

PRE-SITE

Provide a blank consent form.

ON-SITE

The team will review client records.

#### **X.5.05**

**The EAP's confidentiality procedures address the release of information for worker's compensation and disability claims.**

### **Evidence of Compliance (X.5.05)**

PRE-SITE

Provide procedures relevant to releasing such information.

ON-SITE

The team will interview staff and representatives of host or customer organizations.

## **X.6**

### **CONDUCT OF STAFF AND AFFILIATES\*\***

#### **X.6.01**

**The EAP adopts and follows its own code of ethics, requires its professional staff and affiliates to adhere to the codes of ethics of their respective professions, and avoids conflicts of interest in carrying out its responsibilities.**

### **Evidence of Compliance (X.6.01)**

PRE-SITE

Provide the code of ethics and material indicating the EAP's expectation that staff and affiliates will abide by the code of ethics of their respective professions.

ON-SITE

The team will interview staff and affiliates.

- X.6.02            The EAP provides customer organizations with a copy of relevant procedures related to its code of ethics which:**
- a.    establish protections against conflict of interest in making referrals; and**
  - b.    prohibit making or accepting payment or other consideration in exchange for referrals.**

*Interpretation (X.6.02):*

*A corporate conflict of interest policy may be used to meet this requirement, if such a procedure applies to EAP professionals.*

**Evidence of Compliance (X.6.02)**

PRE-SITE

Provide relevant conflict of interest procedures.

ON-SITE

The team will interview staff regarding the scope and implementation of the conflict of interest policy.

- X.6.03            If an EAP contract permits a client to continue to receive services from his/her EAP counselor following completion of contracted services, the following conditions apply:**
- a.    the contract clearly indicates that no self-referrals will be made to an EAP counselor before the allotment of EAP sessions has been used;**
  - b.    the client is given a referral choice of at least two different organizations or individuals, one of whom may be the current EAP counselor; and**
  - c.    the client signs a freedom of choice understanding, which is maintained in the client's record.**

**Evidence of Compliance (X.6.03)**

ON-SITE

The team will review a sample of contracts and signed consents.

## **X.7                CONFLICTS OF INTEREST\***

- X.7.01            In not-for-profit and publicly traded for-profit EAPs, the EAP's conflict of interest policy mandates that members of the board of directors and personnel who are involved individually, or as part of a business or professional firm, in the EAP's business transactions, leases, or current professional services, or who have a financial interest in the organization's assets, disclose this relationship and do not participate in any discussion or vote taken with respect to such transactions, services, or interests.**

**Evidence of Compliance (X.7.01)**

PRE-SITE

Provide the conflict of interest policy and any related procedures.

NA

The EAP is a privately-held for profit-organization.

**X.7.02** In not-for-profit and publicly traded EAPs, the conflict of interest policy prohibits preferential treatment of members of the board of directors, personnel, or contractors in applying for and receiving the EAP's services.

**Evidence of Compliance (X.7.02)**

PRE-SITE

Provide the policy regarding prohibition of preferential treatment.

ON-SITE

The team will interview members of the board of directors, personnel, and/or contractors as needed.

NA The EAP is a privately-held for-profit organization.

## **X.8 RESEARCH POLICIES AND PROCEDURES**

**X.8.01** EAP policy clearly states whether or not it conducts, participates in, or permits research involving clients.

**Evidence of Compliance (X.8.01)**

PRE-SITE

Provide policies that address whether, and to what extent, the EAP conducts, participates in, or permits research involving clients.

**X.8.02** The EAP has a mechanism, such as a human subjects committee or an internal review board, that reports to the chief executive officer or his/her designee, or the board of directors, and:

- a. reviews research proposals that involve clients;
- b. makes recommendations regarding the ethics of proposed or existing research;
- c. makes recommendations as to whether or not to approve research proposals; and
- d. monitors ongoing research activities.

**Evidence of Compliance (X.8.02)**

PRE-SITE

Provide procedures that address how research proposals are reviewed and how research activities are monitored.

NA EAP policy prohibits research involving clients.

**X.8.03** Participation in research is voluntary, and the EAP:

- a. does not threaten to withdraw services or otherwise coerce clients into participating; and
- b. follows procedures governing the use of modest incentives for attracting and retaining participants, as applicable.

**Evidence of Compliance (X.8.03)**

PRE-SITE

Provide procedures that address the voluntary participation of clients in research. The team will review the evidence that is provided for VII.3.04.

ON-SITE

The team will interview research participants and review research records.

NA EAP policy prohibits research involving clients.

**X.8.04 Each research participant, or his/her parent or legal guardian, signs a consent form that includes:**

- a. a statement that s/he voluntarily agrees to participate;**
- b. a statement that the EAP will continue to provide services whether or not s/he agrees to participate;**
- c. an explanation of the nature and purpose of the research;**
- d. a clear description of possible risks or discomfort;**
- e. a guarantee of confidentiality; and**
- f. the participant's signature.**

**Evidence of Compliance (X.8.04)**

**PRE-SITE**

Provide the consent policy or procedure for voluntary participation in research by clients, and procedures for obtaining consent; provide a copy of the consent form used.

**ON-SITE**

The team will interview research participants and review signed consent forms.

NA EAP policy prohibits research involving clients.

**X.8.05 The EAP safeguards the identity and privacy of clients in all phases of research conducted by or with the cooperation of the EAP.**

***Interpretation (X.8.05):***

*Statistical analyses, reports, and summaries are compiled and presented in a manner that masks the identity of the client. Case examples and extracts from individual records must be prepared, prior to dissemination, in a manner that masks the individual's identity.*

**Evidence of Compliance (X.8.05)**

**PRE-SITE**

Provide policies and procedures that address safeguarding the identity and privacy of voluntary participants in all phases of research.

NA EAP policy prohibits research involving clients.

**X.9 ETHICAL CONSIDERATIONS RELATED TO WEB-BASED SERVICES\*\***

NA The EAP does not provide web-based services.

**X.9.01 The EAP that delivers services via a website and requires clients to provide identifying information and/or tracks individual client use of the website, establishes a privacy policy that:**

- a. is clearly posted on the website;**
- b. protects the confidentiality of website users;**
- c. advises clients to read the privacy policy of any linked sites before providing identifying information to such sites; and**

- d. prohibits the EAP from selling, or otherwise making user data available to third-parties.**

**Evidence of Compliance (X.9.01)**

PRE-SITE

Provide the website privacy policy.

**NA** The EAP's website does not require clients to provide identifying information or otherwise track individual client use of the website.

**X.9.02 The EAP further protects client privacy by using up-to-date security technology, including firewalls and encryption software.**

**Evidence of Compliance (X.9.02)**

PRE-SITE

Provide relevant procedures.

ON-SITE

The team will interview the person responsible for the website.

**X.9.03 All website content is reviewed by qualified professionals prior to its inclusion on the EAP's website.**

**Evidence of Compliance (X.9.03)**

PRE-SITE

Provide procedures regarding website content.

**X.9.04 The EAP establishes timeframes that specify how often the website is updated to ensure that information is current, reliable, and free from error.**

**Evidence of Compliance (X.9.04)**

PRE-SITE

Provide relevant procedures.

ON-SITE

The team will interview the person responsible for the website.

**X.9.05 The EAP website provides clients with information on the following:**  
**a. how to contact a live, qualified EAP counselor or affiliate; and**  
**b. phone numbers to use in case of an emergency.**

***Interpretation (X.9.05):***

*This information should appear on each page of the EAP's website.*

**Evidence of Compliance (X.9.05)**

PRE-SITE

Provide the EAP's website address. The team will visit the website.

**NA** The EAP's website serves as a marketing tool only.

**X.10 ETHICAL CONSIDERATIONS RELATED TO THE USE OF SPECIFIC TECHNOLOGIES\*\***

**NA** The EAP does not provide services via the specific technologies described in these standards.

**X.10.01** An EAP that provides services online and/or via telephone adheres to all applicable ethical and legal standards and requirements related to such modes of service.

***Interpretation (X.10.01):***

*In cases where an EAP provides online and/or telephone services across state lines, the EAP must comply with the licensure requirements of the state in which the client resides.*

**Evidence of Compliance (X.10.01)**

PRE-SITE

Provide a description of the review of pertinent ethical codes and how the EAP addresses them.

ON-SITE

The team will interview staff and the program director.

**X.10.02** When client information is sent or transmitted, the EAP:  
a. includes a statement that the information is confidential, and that the receiver may not re-disclose the information without permission; and  
b. verifies receipt of the information.

***Interpretation (X.10.02):***

*Client information is not communicated via facsimile except in urgent circumstances.*

**Evidence of Compliance (X.10.02)**

ON-SITE

The team will observe a demonstration of client information transmission.

**X.10.03** An EAP that provides services via telephone informs the client when the call is being monitored for any reason.

**Evidence of Compliance (X.10.03)**

PRE-SITE

Provide telephone service procedures.

**NA** The EAP does not provide services via telephone.

## **XI. INTAKE, ASSESSMENT, AND SERVICE PLANNING**

- XI.1 Access Procedures\*\*
- XI.2 Intake Process\*\*
- XI.3 General Assessment Requirements\*
- XI.4 Clinical Assessments\*
- XI.5 Referrals
- XI.6 Outreach
- XI.7 Special Service Delivery Considerations\*\*
- XI.8 EAP Staffing Patterns and Ratios\*\*
- XI.9 Client Records\*

## **XI. INTAKE, ASSESSMENT, AND SERVICE PLANNING**

### **XI.1 ACCESS PROCEDURES\*\***

#### **XI.1.01 Procedures for accessing EAP services:**

- a. minimize barriers to the timely initiation of services or use of services; and**
- b. give priority to employees or eligible participants with urgent needs or in emergency situations.**

#### **Evidence of Compliance (XI.1.01)**

##### **PRE-SITE**

Provide access procedures for each service. The team will review the Client Questionnaires.

##### **ON-SITE**

The team will interview staff, and clients when permissible.

- #### **XI.1.02 The EAP communicates to customers, employees, and eligible participants that access to the EAP's services occurs through one of the following mechanisms:**
- a. self-referral by employees and eligible participants for problems that may be adversely affecting their job performance;**
  - b. referrals by supervisors and suggestions by union representatives, human resources, and/or medical personnel; and**
  - c. mandatory referrals.**

#### **Evidence of Compliance (XI.1.02)**

##### **PRE-SITE**

Provide access procedures.

##### **ON-SITE**

The team will interview staff and account managers.

- #### **XI.1.03 The EAP direct service staff have immediate access to information on the benefits conferred to employees under the terms of each contract.**

#### ***Interpretation (XI.1.03):***

*Such benefits may include, for example, utilization requirements or maximum number of sessions.*

#### **Evidence of Compliance (XI.1.03)**

##### **PRE-SITE**

Provide account management procedures.

##### **ON-SITE**

The team will interview intake and counseling staff.

- #### **XI.1.04 Regardless of the type of service, the EAP follows procedures for dealing with client problems that occur during and outside of work hours, which include the following:**
- a. life threatening emergency situations are addressed immediately, 24 hours a day, seven days a week, 365 days a year;**
  - b. counselors with clinical backgrounds are available by telephone to respond to**

- emergencies and are able to access appropriate resources, either directly or by referral; and
- c. non-life threatening emergencies are addressed by the end of the next business day.

**Evidence of Compliance (XI.1.04)**

PRE-SITE

Provide relevant procedures.

ON-SITE

The team will interview the program director regarding emergency procedures.

- XI.1.05**      **EAP services provide toll-free and/or online access, as appropriate, 24 hours a day, seven days a week, 365 days a year to:**
- a. employees and eligible participants needing help; and
  - b. host or customer organization representatives seeking assistance with organizational problems such as traumatic work site incidents.

**Evidence of Compliance (XI.1.05)**

PRE-SITE

Provide material describing telephone and/or online access.

ON-SITE

The team will interview staff, and clients when permissible.

- XI.1.06**      **Employees and eligible participants are able to see counselors in person before, during, or after work hours, and counselors:**
- a. are available within 30 miles of client homes or work sites, unless the geography of the area prohibits such availability;
  - b. are located near public transportation;
  - c. offer appointments at least one evening a week; and
  - d. provide clear directions to the counseling site.

**Evidence of Compliance (XI.1.06)**

PRE-SITE

Provide documentation that addresses the requirements of the standard.

- XI.1.07**      **The EAP adjusts its staffing patterns and availability to accommodate the working hours of employees at the host or customer organization.**

**Evidence of Compliance (XI.1.07)**

PRE-SITE

Provide a schedule of hours highlighting the times that have been adapted for shift workers.

ON-SITE

The team will interview the program director.

**XI.2**            **INTAKE PROCESS\*\***

- XI.2.01**      **The EAP follows standard procedures for intake in all services, including face-to-face counseling, telephone, and online services, as applicable.**

**Evidence of Compliance (XI.2.01)**

PRE-SITE

Provide intake procedures.

ON-SITE

The team will interview intake staff.

**XI.2.02            At the point of intake, intake personnel immediately establish if the client is experiencing an emergency and provide services, as appropriate.**

**Evidence of Compliance (XI.2.02)**

PRE-SITE

Provide intake procedures.

ON-SITE

The team will interview supervisors of intake staff.

**XI.2.03            At intake, the EAP provides the following in writing, or explains telephonically with follow-up documentation:**

- a. referral resources and referral procedures;**
- b. the service and the number of sessions or contacts based on contractual agreement; and**
- c. follow-up procedures.**

**Evidence of Compliance (XI.2.03)**

ON-SITE

The team will review client records and/or contractual agreements.

**XI.2.04            The EAP bases its intake methods on the services it provides and the needs of its clients.**

**Evidence of Compliance (XI.2.04)**

PRE-SITE

Provide intake procedures.

ON-SITE

The team will interview supervisors of intake staff.

## **XI.3                GENERAL ASSESSMENT REQUIREMENTS\***

**XI.3.01            At the intake interview or initial assessment, EAP counselors obtain relevant assessment information including, but not limited to:**

- a. demographic information;**
- b. the nature of the request or presenting problem;**
- c. any work-related issues; and**
- d. a diagnosis, as applicable and when required by the EAP contract.**

**Evidence of Compliance (XI.3.01)**

PRE-SITE

Provide assessment procedures.

ON-SITE

The team will review client records.

**XI.3.02            The assessment includes information used to determine whether to retain a case for**

**short-term counseling, or whether it is appropriate to refer the case to outside or approved resources for ongoing treatment.**

***Interpretation (XI.3.02):***

*Services that require referral include, but are not limited to, presenting problems that involve psychosis, inpatient needs, addiction treatment, or severe medical complications.*

**Evidence of Compliance (XI.3.02)**

PRE-SITE

Provide assessment procedures.

ON-SITE

The team will interview supervisors.

- XI.3.03            At the initial counseling session, the counselor and the client:**
- a. assess the underlying problem and complete the assessment;**
  - b. determine the goals to be achieved; and**
  - c. develop the preliminary service plan.**

**Evidence of Compliance (XI.3.03)**

PRE-SITE

Provide assessment procedures.

ON-SITE

The team will review client records.

**XI.4                CLINICAL ASSESSMENTS \***

**Note:**            The term “clinical” in these standards may be used interchangeably with the term “biopsychosocial.”

**NA**                The EAP does not provide clinical assessments.

**XI.4.01            Clinical assessments contain, at a minimum, the following information:**

- a. environment and home situation;**
- b. religion, if appropriate;**
- c. financial status and health insurance, if appropriate;**
- d. social and peer groups;**
- e. interests, skills, and aptitudes;**
- f. work history and military service, as applicable;**
- g. education; and**
- h. date of last medical exam.**

**Evidence of Compliance (XI.4.01)**

PRE-SITE

Provide assessment procedures.

ON-SITE

The team will review client records.

- XI.4.02            Clinical assessments also include:**
- a. physical illness/somatic variables/medical treatment;**
  - b. the use of alcohol or other drugs;**

- c. **behavioral/cognitive patterns that cause health risks, based on physical, emotional, behavioral, or social conditions; and**
- d. **when appropriate, legal, vocational, and/or nutritional needs of the client.**

**Evidence of Compliance (XI.4.02)**

PRE-SITE

Provide a clinical assessment form.

ON-SITE

The team will review client records.

## **XI.5 REFERRALS**

**XI.5.01 The EAP immediately notifies clients if it cannot promptly provide needed services.**

**Evidence of Compliance (XI.5.01)**

PRE-SITE

Provide copies of procedures that address the requirements of the standard.

ON-SITE

The team will interview staff, and clients when permissible.

**XI.5.02 The EAP has procedures to facilitate client referrals which address the provision of consultation between the EAP and the host or customer organization, and responsibilities for providing follow-up, aftercare, and transition for clients.**

**Evidence of Compliance (XI.5.02)**

PRE-SITE

Provide referral procedures or guidelines.

ON-SITE

The team will interview staff.

**XI.5.03 The EAP makes a referral when the client requires services beyond the stated or contractual mandate of the EAP, or when specialty resources are not available through the EAP.**

***Interpretation (XI.5.03):***

*For example, in the case of a short-term counseling model it may be appropriate to refer the client for alcohol/drug rehabilitation or psychiatric care.*

**Evidence of Compliance (XI.5.03)**

PRE-SITE

Provide referral procedures or guidelines.

ON-SITE

The team will review client records.

**XI.5.04 When making referrals, the EAP informs clients that they will be responsible for the cost of services beyond those provided by the EAP, and/or of any liabilities that may be incurred, such as insurance company access to files.**

**Evidence of Compliance (XI.5.04)**

PRE-SITE

Provide the Statement of Understanding.

ON-SITE

The team will review client records.

**XI.5.05            The EAP uses the client’s unique needs to guide referrals to organizations or any providers of goods and services.**

*Interpretation (XI.5.05):*

*The client’s “unique needs” include level of care, geography, clinical requirements, or preference for a provider of a particular gender or ethnic background, when doing so is legally permissible.*

**Evidence of Compliance (XI.5.05)**

PRE-SITE

Provide referral procedures or guidelines.

ON-SITE

The team will interview staff and review client records.

**XI.5.06            The EAP maintains a log of clients and referral sources for persons who are referred out of the EAP for services, which includes the following:**

- a. specific referral source;
- b. date and method of referral;
- c. date the case is opened;
- d. date of the first appointment offered;
- e. date of the first face-to-face appointment;
- f. client identifier;
- g. presenting problem;
- h. disposition;
- i. follow-up schedule (to be included only in the client record);
- j. name of counselor making the referral; and
- k. date the case is closed.

**Evidence of Compliance (XI.5.06)**

ON-SITE

The team will review the log, which may be at a local location.

**XI.5.07            The case manager or EAP counselor conducts follow-up on referrals to outside agencies and documents the results for evaluation purposes.**

**Evidence of Compliance (XI.5.07)**

PRE-SITE

Provide follow-up procedures and data collection procedures and tools.

ON-SITE

The team will interview the clinical or program director and relevant staff.

## **XI.6                OUTREACH**

**XI.6.01            Mechanisms for providing information to employees and eligible participants include, but are not limited to:**

- a. brochures, newsletters, and flyers;
- b. introductory letters;

- c. orientation sessions;
- d. supervisory and/or key employee training;
- e. promotional activities;
- f. educational activities; and
- g. internet and intranet communications.

**Evidence of Compliance (XI.6.01)**

PRE-SITE

Provide brochures, orientation schedules and curricula, training schedules, and a description of internet and intranet resources.

**XI.6.02            The EAP offers targeted promotional material to eligible participants every 18 months, or as directed by the host or customer organization.**

**Evidence of Compliance (XI.6.02)**

PRE-SITE

Provide samples of targeted promotional material.

ON-SITE

The team will interview the appropriate staff member.

**XI.7                SPECIAL SERVICE DELIVERY CONSIDERATIONS\*\***

**XI.7.01            When the client is a victim of abuse or neglect, the EAP intervenes with more intensive services and provides more frequent monitoring and coordination with providers.**

**Evidence of Compliance (XI.7.01)**

PRE-SITE

Provide procedures or other documentation that describes interventions with victims of abuse and neglect.

ON-SITE

The team will interview the clinical or program director, and review client records.

**XI.7.02            EAP procedures address back-up and support in managing cases that involve threats of violence, including homicidal or suicidal ideation.**

**Evidence of Compliance (XI.7.02)**

PRE-SITE

Provide procedures and telephone resources as required.

ON-SITE

The team will interview the clinical or program director.

**XI.7.03            The EAP provides culturally diverse and accessible services that include:**

- a. assumption of service responsibility in rural and remote areas;
- b. assumption of service responsibility for persons with visual, hearing, and physical impairments; and
- c. diversity training for all professional staff associated with the program.

**Evidence of Compliance (XI.7.03)**

PRE-SITE

Provide training materials, service locations, and other written documents that address the requirements of

the standard. The team will review the Stakeholder Questionnaires.

ON-SITE

The team will interview the clinical or program director.

**XI.7.04 Service planning and delivery meet the diverse and unique needs and preferences of clients.**

***Interpretation (XI.7.04):***

*Diverse and unique needs and preferences may be related to age, sex, gender, sexual orientation, physical limitations, ethnicity, culture, and other characteristics.*

**Evidence of Compliance (XI.7.04)**

PRE-SITE

Provide procedures or other documentation that address diversity issues in service planning and delivery.

The team will review the Client Questionnaires.

ON-SITE

The team will interview the clinical or program director.

**XI.8 EAP STAFFING PATTERNS AND RATIOS\*\***

- XI.8.01 The EAP maintains staff ratios for short-term counseling services as follows:**
- a. for eight session models, one full-time equivalent counselor or affiliate to 3,500-4,000 employees; and**
  - b. for six-session models, one full-time equivalent counselor or affiliate to 4,000-5,000 employees.**

***Interpretation (XI.8.01):***

*These ratios assume a 45-minute, telephone or face-to-face session, with a 5% utilization rate.*

**Note:** When the employee population is located over a large geographical area, the ratio is determined by access to the counseling location, with the overriding criterion being the availability of a counselor within 30 miles of the client's worksite or home. EAP administrative and support staff should not be included in the staff-to-eligible population ratio unless administrators handle cases on a regular basis. At no time is the chief executive officer or equivalent to be considered more than a half-time counselor.

**Evidence of Compliance (XI.8.01)**

PRE-SITE

Provide documentation of staff/employee ratios.

ON-SITE

The team will interview the senior management.

**NA** The EAP does not provide short-term counseling.

**XI.8.02 An EAP that provides information and referral, or assessment and referral, maintains at least one counselor or affiliate to 8,000 employees.**

**Note:** When the employee population is located over a large geographical area, the ratio is determined by access to the counseling location, with the overriding criterion being the availability of a counselor within 30 miles of the client's worksite or home. EAP

administrative and support staff should not be included in the staff-to-eligible population ratio unless administrators handle cases on a regular basis. At no time is the chief executive officer or equivalent to be considered more than a half-time counselor.

**Evidence of Compliance (XI.8.02)**

PRE-SITE

Provide documentation of staff/employee ratios.

ON-SITE

The team will interview the senior management.

**XI.8.03           EAP counselors that provide short-term counseling average no more than 28 hours per week of counseling over any four-week period.**

***Interpretation (XI.8.03):***

*Counselors may be full-time or full-time equivalents. The standard applies whether counseling is provided face-to-face or via telephone.*

**Evidence of Compliance (XI.8.03)**

PRE-SITE

Provide relevant documentation.

ON-SITE

The team will interview counselors and review appointment logs.

**XI.8.04           The EAP maintains a formal relationship with a board-certified psychiatrist who provides on-call consultation.**

**Evidence of Compliance (XI.8.04)**

ON-SITE

The team will review the contract or letter of agreement between the EAP and the psychiatrist.

**XI.9               CLIENT RECORDS\***

**Note:** All policies and procedures pertaining to client records apply to subcontractors and affiliates, as well as staff offices.

**XI.9.01           The EAP maintains a record that addresses EAP service use for each client.**

**Evidence of Compliance (XI.9.01)**

PRE-SITE

Provide relevant procedures regarding client records.

**XI.9.02           Client record entries contain only the information that is necessary to properly serve the client.**

**Evidence of Compliance (XI.9.02)**

PRE-SITE

Provide record entry procedures.

ON-SITE

The team will review client records.

- XI.9.03**            **The EAP client record contains:**
- a. a statement of the presenting problem, as appropriate to the service provided;
  - b. demographic information on the client, including age, sex, and ethnicity;
  - c. results of any assessments;
  - d. service plans; and
  - e. progress notes.

**Evidence of Compliance (XI.9.03)**

ON-SITE

The team will review client records.

- XI.9.04**            **The client record also contains:**
- a. a detailed account of the supervision or consultation, including data for the recommendations and actions taken;
  - b. follow-up plans; and
  - c. a closing summary.

***Interpretation (XI.9.04):***

*Supervision and/or consultation primarily address the elements outlined in IX.1.01. Issues related to the quality of the work performed by staff and/or affiliates should be documented in the personnel or affiliate file, or in separate files maintained by the supervisor, not in the client record.*

**Evidence of Compliance (XI.9.04)**

PRE-SITE

The team will review record entry procedures.

ON-SITE

The team will review client records.

- XI.9.05**            **When necessary due to the nature of individual needs and/or the type of service being provided, basic information is supplemented by psychological, medical, or biopsychosocial evaluations.**

**Evidence of Compliance (XI.9.05)**

PRE-SITE

The team will review record entry procedures.

ON-SITE

The team will review client records.

- XI.9.06**            **Upon termination of service, or within 30 days of termination, a closing summary is entered into the client record which includes:**
- a. a report of changes in condition regarding the assessed problem;
  - b. recommendations for further action by the client and employer; and
  - c. referral or recommendations for any future services, as appropriate.

**Evidence of Compliance (XI.9.06)**

PRE-SITE

The team will review record entry procedures.

ON-SITE

The team will review client records.

- XI.9.07**            **All record entries for services are completed, signed, and dated by the person who**

**provided the service.**

**Evidence of Compliance (XI.9.07)**

PRE-SITE

The team will review record entry procedures.

ON-SITE

The team will review client records.

**XI.9.08            The EAP screens its client records for unsummarized notes, observations, and impressions, and other material that should be expunged at the closing of the record, and at least annually.**

***Interpretation (XI.9.08):***

*This standard applies to both hard copy and electronic records.*

**Evidence of Compliance (XI.9.08)**

PRE-SITE

Provide record reconciliation procedures.

ON-SITE

The team will interview staff responsible for reconciling records.

## **XII. SERVICE DELIVERY**

- XII.1 Prevention Services\*\*
- XII.2 Training of Supervisors and Union Representatives\*
- XII.3 Organizational Development\*
- XII.4 Critical Incident Stress Management\*
- XII.5 Drug Free Workplace Services\*
- XII.6 Work-Life Services\*
- XII.7 Work-Life: Legal Services\*
- XII.8 Informational and Referral, and Assessment and Referral Services\*
- XII.9 Short-Term Counseling\*
- XII.10 Special Considerations for Online and Telephone Services
- XII.11 International

## **XII. SERVICE DELIVERY**

### **XII.1 PREVENTION SERVICES\*\***

**XII.1.01 The EAP provides prevention services that address the following components:**

- a. outreach;**
- b. health promotion and wellness; and**
- c. coordination with healthcare providers.**

**Evidence of Compliance (XII.1.01)**

PRE-SITE

Provide examples of prevention-based activities.

ON-SITE

The team will interview staff responsible for prevention services.

**XII.1.02 Topics addressed in prevention activities are changed and updated to reflect the needs and feedback of the host or customer organization and its employees.**

**Evidence of Compliance (XII.1.02)**

PRE-SITE

Provide examples of prevention-based activities.

ON-SITE

The team will interview staff responsible for prevention services.

**XII.1.03 The EAP emphasizes the importance of prevention in all of its activities and offers to provide at least one primary prevention activity annually, for the host or customer organization.**

**Evidence of Compliance (XII.1.03)**

PRE-SITE

Provide examples of prevention-based activities.

ON-SITE

The team will interview staff responsible for prevention services.

**XII.1.04 The EAP develops and offers educational sessions on wellness and other prevention-related topics.**

**Evidence of Compliance (XII.1.04)**

PRE-SITE

Provide examples of prevention-based activities.

ON-SITE

The team will interview staff responsible for prevention services.

### **XII.2 TRAINING OF SUPERVISORS AND UNION REPRESENTATIVES\***

**XII.2.01**        **The EAP provides general education and training to supervisors, union representatives, human resource professionals, safety committee members, benefits managers, and other key employees, as applicable.**

**Evidence of Compliance (XII.2.01)**

ON-SITE

The team will interview staff responsible for training and development.

**XII.2.02**        **Supervisory training addresses how to recognize signs of deteriorating job performance and the proper means of documenting this in the personnel record.**

**Evidence of Compliance (XII.2.02)**

PRE-SITE

Provide training material.

ON-SITE

The team will interview supervisors.

**XII.2.03**        **The EAP provides individual supervisors and human resource professionals with training on how to make referrals to the EAP for management of employee job performance and behavioral problems.**

**Evidence of Compliance (XII.2.03)**

PRE-SITE

Provide training curricula.

ON-SITE

The team will interview staff and representatives of host or customer organizations.

**XII.2.04**        **Within four months of program start-up, the EAP, at the discretion of the host or customer organization, provides training which includes, but is not limited to:**

- a. the philosophy of the EAP;**
- b. confidentiality procedures and protections;**
- c. range of services provided;**
- d. location of offices, hours of operation, and telephone numbers; and**
- e. roles and responsibilities of management, supervisors, and union representatives, as applicable.**

**Evidence of Compliance (XII.2.04)**

PRE-SITE

Provide the training schedule and curricula.

ON-SITE

The team will review evidence that such training has occurred.

**XII.3**        **ORGANIZATIONAL DEVELOPMENT\***

**NA**        **The EAP does not provide organizational development.**

**XII.3.01**        **The EAP offers organizational development services on the following topics:**

- a. needs assessment;**
- b. policy development;**

- c. team building; and
- d. executive coaching.

**Evidence of Compliance (XII.3.01)**

PRE-SITE

Provide a description of organizational development services.

ON-SITE

The team will interview staff.

**XII.3.02 The EAP offers education and management consultation to host or customer organizations on other matters including:**

- a. critical incident stress management protocols;
- b. managing change;
- c. smoke free workplace;
- d. workplace violence; and
- e. managed care.

**Evidence of Compliance (XII.3.02)**

PRE-SITE

Provide a description of the EAP's education and consultation services, including training materials.

ON-SITE

The team will interview representatives of host or customer organizations.

**XII.3.03 Ongoing management consultation is available to host or customer organizations as they help clients reintegrate into the workplace.**

***Interpretation (XII.3.03):***

*Consultation is provided within the confidentiality provisions and with a signed release of information from the client, and adherence to reasonable accommodation laws.*

**Evidence of Compliance (XII.3.03)**

ON-SITE

The team will interview staff.

**XII.3.04 The EAP includes a disclaimer in all contracts which states that any advice or recommendations made during the course of providing consultation to management is not and cannot be construed as a legal opinion.**

**Evidence of Compliance (XII.3.04)**

ON-SITE

The team will review contracts.

**XII.3.05 The EAP includes disclaimers in its promotional material to clarify that opinions expressed are informational and are not meant to represent the host or customer organization or the EAP.**

**Evidence of Compliance (XII.3.05)**

PRE-SITE

Provide promotional or educational material.

## **XII.4 CRITICAL INCIDENT STRESS MANAGEMENT\***

**NA** The EAP does not provide critical incident stress management.

**XII.4.01** **The EAP provides critical incident stress management (CISM) and supportive services when a host or customer organization faces a crisis situation.**

### **Evidence of Compliance (XII.4.01)**

PRE-SITE

Provide documentation describing CISM and related services.

ON-SITE

The team will interview staff providing CISM and representatives of host or customer organizations that have received CISM.

**XII.4.02** **Each EAP contract includes a clear definition of a critical incident.**

### **Evidence of Compliance (XII.4.02)**

PRE-SITE

Provide documentation with contract language describing CISM and related services.

ON-SITE

The team will interview staff providing CISM.

**XII.4.03** **The EAP consults with a designated representative of the host or customer organization to determine if CISM is an appropriate intervention.**

### **Evidence of Compliance (XII.4.03)**

PRE-SITE

Provide procedures on CISM.

ON-SITE

The team will interview representatives from host or customer organizations.

**XII.4.04** **The EAP trains its CISM counselors to assess the level of intervention that is required in particular situations.**

### **Evidence of Compliance (XII.4.04)**

PRE-SITE

Provide procedures on CISM.

ON-SITE

The team will interview counselors.

**XII.4.05** **For CISM services, the EAP collects and analyzes data on the following for host or customer organizations:**

- a. size of groups;**
- b. number of sessions and/or number of hours spent in total; and**
- c. number of counselors required per incident.**

### **Evidence of Compliance (XII.4.05)**

PRE-SITE

Provide procedures on CISM.

ON-SITE

The team will interview staff and review data.

## **XII.5 DRUG FREE WORKPLACE SERVICES\***

**NA** The EAP does not offer Drug Free Workplace Services.

**Note:** COA requires the EAP to include documentation in its self-study document to support this NA.

- XII.5.01** **The EAP offers a needs assessment to determine:**
- a. what components of a Drug Free Workplace are most appropriate for the host or customer organization; and**
  - b. for which of the identified components the EAP will be providing services.**

### **Evidence of Compliance (XII.5.01)**

#### **PRE-SITE**

Provide a sample of needs assessment procedures and tools.

#### **ON-SITE**

The team will review completed needs assessments.

- XII.5.02** **Upon request, the EAP provides the host or customer organization with samples of Drug Free Workplace policies and procedures that meet federal and state guidelines.**

### ***Interpretation (XII.5.02):***

*Samples of Drug Free Workplace policies may include, but are not limited to, information on drug testing procedures, drugs being tested for, who can be tested and under what conditions, the consequences of refusing to take a test, testing positive, and who is responsible for paying for the drug test.*

### **Evidence of Compliance (XII.5.02)**

#### **PRE-SITE**

Provide samples of Drug Free Workplace policies provided to the host or customer organization.

#### **ON-SITE**

The team will review policies that have been designed for three customer organizations.

- XII.5.03** **The EAP assists in the development of an implementation schedule of Drug Free Workplace requirements and provides training sessions on implementation which include:**
- a. the supervisor's responsibility in implementing the policy;**
  - b. information related to Department of Transportation regulations, and/or the Drug Free Workplace Act;**
  - c. how to deal with performance problems when personal problems are a contributing factor;**
  - d. the expectation that a supervisor-initiated referral is based solely upon performance issues or a request for assistance by the employee; and**
  - e. procedures to deal with referrals resulting from confirmed drug tests.**

### ***Interpretation (XII.5.03):***

*The procedures described in (b) refer to United States legislation and programs, and do not apply in Canada nor in other countries.*

**Evidence of Compliance (XII.5.03)**

PRE-SITE

Provide training schedules and curricula.

ON-SITE

The team will interview supervisors.

- XII.5.04**      **The EAP provides employee education that addresses the following:**
- a. the Drug Free Workplace policy, including how to understand, cooperate with, and benefit from the policy and program;**
  - b. the types of assistance available through the EAP; and**
  - c. information about substance abuse and the dangers of substance use on the job.**

**Evidence of Compliance (XII.5.04)**

PRE-SITE

Provide sample training programs and implementation schedules.

ON-SITE

The team will interview staff who provide training.

- XII.5.05**      **Training for supervisors includes how to:**
- a. observe and assess employee job performance over time;**
  - b. recognize and assist employees who have job performance problems that may be associated with alcohol or drugs;**
  - c. refer an employee for assistance;**
  - d. document employee successes and problems;**
  - e. enforce the Drug Free Workplace policy consistently; and**
  - f. maintain confidentiality.**

***Interpretation (XII.5.05):***

*When drug testing is a part of the program, training must also include information on testing policies and procedures.*

**Evidence of Compliance (XII.5.05)**

PRE-SITE

Provide training schedules and curricula.

ON-SITE

The team will interview supervisors.

- XII.5.06**      **When drug/alcohol testing is part of the Drug Free Workplace program, such testing is administered in a manner that protects the anonymity and confidentiality of self-referred clients.**

**Evidence of Compliance (XII.5.06)**

PRE-SITE

Provide relevant procedures.

ON-SITE

The team will review client records.

- NA**              Drug/alcohol testing is not part of the program.

- XII.5.07**      **The EAP offers a comprehensive assessment, referral, and monitoring program for**

**employees who test positive for, or self-identify as, drug or alcohol abusers, and procedures for such a program include:**

- a. a Statement of Understanding;**
- b. the differences between the Drug Free Workplace program and other EAP services;**
- c. the limits of confidentiality;**
- d. a standardized chemical dependency assessment form;**
- e. the standardized level of care criteria; and**
- f. a standardized Release of Information form for collateral contacts.**

**Evidence of Compliance (XII.5.07)**

PRE-SITE

Provide relevant procedures and forms.

ON-SITE

The team will interview the program director and will review client records.

**XII.5.08            When the EAP provides Substance Abuse Professional services, it complies with Department of Transportation regulations and other federal and state regulations.**

**Evidence of Compliance (XII.5.08)**

PRE-SITE

Provide a description of the EAP's compliance with these regulations.

ON-SITE

The team will interview staff and review client records.

NA                    The EAP does not provide Substance Abuse Professional services.

**XII.6                WORK-LIFE SERVICES\***

NA                    The EAP does not provide work-life services.

**XII.6.01            The EAP conducts a needs assessment of the host or customer organization to determine the most appropriate and effective work-life services for the host or customer organization and its employees.**

**Evidence of Compliance (XII.6.01)**

PRE-SITE

Provide three samples of needs assessments.

ON-SITE

The team will interview the person responsible for conducting needs assessments.

**XII.6.02            EAP assessment procedures include the use of a work-life intake tool to evaluate client needs.**

**Evidence of Compliance (XII.6.02)**

PRE-SITE

Provide assessment procedures.

**XII.6.03            Materials distributed as part of work-life services are:**  
**a. accurate and well-researched;**

- b. non-discriminatory; and
- c. updated at least every three years.

***Interpretation (XII.6.03):***

*This includes work-life information provided via the EAP's website.*

**Evidence of Compliance (XII.6.03)**

PRE-SITE

Provide information related to the requirements of the standard.

ON-SITE

The team will interview the person responsible for researching work-life materials.

**XII.6.04      The EAP maintains up-to-date information on referral resources which includes, but is not limited to the following:**

- a. contact information;
- b. type of service offered;
- c. licensure information;
- d. location; and
- e. cost for clients.

**Evidence of Compliance (XII.6.04)**

ON-SITE

The team will review information related to the requirements of the standard.

**XII.6.05      The EAP annually conducts random site reviews of five percent of its referral resources to assess the following:**

- a. quality of the service provided;
- b. safety and accessibility of the physical facilities; and
- c. possession of current licensure, as applicable.

***Interpretation (XII.6.05):***

*Agreements with subcontractors that provide work-life information and referral require the same review of referral resources as that done by the EAP.*

**Evidence of Compliance (XII.6.05)**

PRE-SITE

Provide procedures for monitoring and evaluating referral resources.

ON-SITE

The team will interview the chief executive officer or his/her designee, and the quality improvement director or equivalent, and review a sample of relevant contracts.

**XII.6.06      The EAP keeps a record of clients who request work-life services.**

**Evidence of Compliance (XII.6.06)**

ON-SITE

The team will review the record.

**XII.7            WORK-LIFE: LEGAL SERVICES\***

**NA              The EAP does not provide legal services.**

**XII.7.01**            **Contracts with the legal services providers address whether self-referral for associated legal services is permitted.**

**Evidence of Compliance (XII.7.01)**

ON-SITE

The team will review contracts.

**XII.7.02**            **All attorneys used by the EAP have expertise in the area in which they practice or self-refer.**

**Evidence of Compliance (XII.7.02)**

PRE-SITE

Provide credential verification procedures.

ON-SITE

The team will interview staff responsible for legal services contracts.

**XII.7.03**            **The EAP informs clients of the types of legal services that are covered by the EAP, such as legal advice services other than representation, and the number of hours allowed.**

**Evidence of Compliance (XII.7.03)**

ON-SITE

The team will review client records.

**XII.7.04**            **The client is informed of all fees for legal services during the initial consultation session, and fees for self-referrals for legal services are reasonable.**

**Evidence of Compliance (XII.7.04)**

PRE-SITE

Provide fee schedules or arrangements.

ON-SITE

The team will review client records.

**XII.7.05**            **The EAP has a procedure that requires legal services providers to make referrals only to attorneys who practice in the state in which the client's legal matter resides.**

**Evidence of Compliance (XII.7.05)**

ON-SITE

The team will review contracts.

**XII.7.06**            **If the legal services provider identifies other issues relevant to the client, s/he must refer the client back to the EAP, as appropriate.**

***Interpretation (XII.7.06):***

*Other issues may include, but are not limited to, co-existing mental health or family concerns, such as stress from a divorce or child custody arrangements.*

**Evidence of Compliance (XII.7.06)**

PRE-SITE

Provide the written referral agreement for the legal services provider.

**XII.7.07**            **If the host or customer organization and the EAP permit self-referral for legal services, the legal services provider offers the client a choice by providing the name of at least one other attorney who is separate from any firm with which the EAP may have a financial interest.**

**Evidence of Compliance (XII.7.07)**

PRE-SITE

Provide self-referral procedures.

ON-SITE

The team will review contracts.

**NA**                    The host or customer organization and the EAP do not permit self-referral for legal services.

**XII.7.08**            **The EAP requires all legal services providers to report the following information, at least quarterly:**

- a. number of cases;**
- b. case disposition;**
- c. type of cases; and**
- d. number of cases referred back to the EAP.**

**Evidence of Compliance (XII.7.08)**

PRE-SITE

Provide reporting guidelines issued to legal services providers.

ON-SITE

The team will review contracts.

**XII.8                    INFORMATION AND REFERRAL, AND ASSESSMENT AND REFERRAL SERVICES\***

**XII.8.01**            **The EAP can demonstrate a rapid and effective response in linking clients in need with appropriate EAP resources and supportive interventions.**

**Evidence of Compliance (XII.8.01)**

PRE-SITE

Provide data indicating the response time.

ON-SITE

The team will interview the program director.

**XII.8.02**            **The EAP maintains records of referrals made to collaborating organizations and conducts routine follow-up on a sample of referred cases to determine whether individuals receive the services for which they were referred.**

**Evidence of Compliance (XII.8.02)**

PRE-SITE

Provide follow-up procedures.

ON-SITE

The team will interview staff and review records.

**XII.8.03** When the EAP's information and referral service has a particular focus, such as elder care or legal services, the EAP adequately informs the participants of this specialization.

**Evidence of Compliance (XII.8.03)**

ON-SITE

The team will interview information and referral counselors and supervisors.

NA The EAP does not operate with a particular focus.

**XII.8.04** For each service offered to the host or customer organization, the EAP maintains separate policies and procedures addressing eligibility, access, financial terms, and other essential issues.

**Evidence of Compliance (XII.8.04)**

PRE-SITE

Provide policies and procedures.

ON-SITE

The team will review contracts.

**XII.9 SHORT-TERM COUNSELING\***

NA The EAP does not provide short-term counseling.

**XII.9.01** The EAP provides clinical services through a comprehensive, formal delivery system.

**Evidence of Compliance (XII.9.01)**

PRE-SITE

Provide a description of the service delivery system.

ON-SITE

The team will interview the clinical director.

**XII.9.02** For clients with mental health and/or substance abuse problems, qualified counselors document, as permitted by law, the results of their assessments which may include a diagnostic summary, and/or a diagnosis according to the current Diagnostic and Statistical Manual of Mental Disorders of the American Psychiatric Association, or relevant assessment criteria of the respective country.

**Evidence of Compliance (XII.9.02)**

PRE-SITE

Provide procedures that describe how the EAP assesses and diagnoses clients with mental health and/or substance abuse problems.

ON-SITE

The team will interview the clinical director.

**XII.9.03** EAP counselors establish brief service goals that are behaviorally focused and measurable, and such goals are based on the assessed problem(s).

**Evidence of Compliance (XII.9.03)**

PRE-SITE

Provide service planning procedures.

ON-SITE

The team will interview clients when permissible, and review client records.

**XII.9.04        The service plan builds on strengths, engages clients in resolving their problems or requests, and is focused on the timely resolution of the needs and goals presented.**

**Evidence of Compliance (XII.9.04)**

PRE-SITE

Provide service planning procedures.

ON-SITE

The team will review client records.

## **XII.10        SPECIAL CONSIDERATIONS FOR ONLINE AND TELEPHONE SERVICES**

**NA                The EAP does not provide services via online and/or telephone modalities.**

**XII.10.01        A service agreement is established between the client and staff member or affiliate before telephone and/or online modalities are used to provide EAP services.**

**Evidence of Compliance (XII.10.01)**

ON-SITE

The team will review client records.

**XII.10.02        The EAP uses telephone and/or online services in one or more of the following circumstances:**

- a. pursuant to a contract with the customer;**
- b. the client is remote and thus suitable for telephone or online services;**
- c. the client has mobility problems; or**
- d. a supervisor determines there are other extenuating circumstances that merit the use of telephone or online services.**

**Evidence of Compliance (XII.10.02)**

PRE-SITE

Provide telephone and/or online service procedures.

ON-SITE

The team will interview telephone and/or online staff.

**XII.10.03        The EAP requires all telephone counselors and affiliates to use a hard-wired, non-portable telephone and to inform the client of optimal circumstances for the delivery of telephone services, such as:**

- a. allocation of sufficient time free from non-emergent interruptions; and**
- b. the non-use of cordless or cellular telephones, except in an emergency.**

*Interpretation (XII.10.03):*

*Portable telephones are permissible in emergency situations.*

**Evidence of Compliance (XII.10.03)**

PRE-SITE

Provide telephone service procedures.

NA The EAP does not provide telephone services.

## **XII.11 INTERNATIONAL**

NA The EAP operates exclusively in its country of incorporation.

**XII.11.01 EAPs that serve their clients internationally ensure that all EAP providers are qualified according to the relevant standards in this section and possess terminal degrees from the countries in which they operate, when applicable.**

### **Evidence of Compliance (XII.11.01)**

PRE-SITE

Provide relevant job descriptions.

ON-SITE

The team will interview human resources personnel and review personnel records.

**XII.11.02 EAPs based in a foreign country ensure that all EAP providers are qualified according to the requirements of their respective locations.**

**Note:** EAP companies based in one country, but providing services in another country, must demonstrate that their identified network of resources is active, meets local licensure and/or certification requirements, and is eligible for liability insurance.

### **Evidence of Compliance (XII.11.02)**

PRE-SITE

Provide relevant job descriptions.

ON-SITE

The team will interview human resources personnel and review personnel records.

**XII.11.03 International EAPs adhere to all laws and customs in the countries in which they operate and serve clients.**

### ***Interpretation (XII.11.03):***

*This standard applies to multinational corporations that serve employees abroad, as well as EAPs that are incorporated in a foreign country, and includes all country-specific issues related to confidentiality, record keeping, and legal mandates impacting the workplace and EAP service delivery, such as drug testing.*

### **Evidence of Compliance (XII.11.03)**

PRE-SITE

Provide a narrative describing applicable laws and customs, and describe compliance.

**XII.11.04 International EAPs adhere to a code of ethics created internally or through a professional membership organization that addresses standards related to professional competency and on-going staff development, conduct, business practices, record-keeping, and confidentiality.**

**Evidence of Compliance (XII.11.04)**

PRE-SITE

Provide a copy of the code of ethics.

**XII.11.05 All international staff and affiliates receive an orientation to the EAP's ethical standards and/or a copy of such standards.**

**Evidence of Compliance (XII.11.05)**

PRE-SITE

Provide a copy of orientation materials.

**XII.11.06 The program design of international EAPs incorporates mechanisms for communication and promotion of the program in a culturally sensitive fashion.**

***Interpretation (XII.11.06):***

*This includes communication materials, supervisor training, and employee orientations, as defined by the standards.*

**Evidence of Compliance (XII.11.06)**

ON-SITE

The team will interview staff.

**XII.11.07 Where impossible to comply with these standards due to country-specific barriers, EAP providers have a defined policy for follow-up with EAP clients that is culturally sensitive and promotes quality of services delivered, optimal outcome results, and participant satisfaction.**

**Evidence of Compliance (XII.11.07)**

PRE-SITE

Provide the policy on cultural sensitivity.

**NA The EAP is able to meet the standards.**