EMPLOYEE ASSISTANCE SOCIETY OF NORTH AMERICA

EMPLOYEE ASSISTANCE PROGRAM STANDARDS AND SELF-STUDY MANUAL

1st EDITION \ VERSION 1.0

The Symbol of Quality
COA

COUNCIL ON ACCREDITATION

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Welcome to the EASNA EAP Accreditation Program Administered by COA

The Employee Assistance Society of North America (EASNA) and the Council on Accreditation for Children and Family Services (COA) congratulate you on your organization's decision to pursue accreditation. From the organizations that have successfully achieved accreditation, we have learned that each of the organizations in this impressive group shares a deep and abiding commitment to delivering the highest quality services.

Accreditation serves important purposes for the organization. It:

1) provides an external, objective marker for the organization's consumers and many stakeholders that the organization meets national standards of organizational strength and quality of service; and

2) results in a detailed analysis that charts specific strengths and weaknesses in areas of the organization's governance, operations, and services and which provides a framework for ongoing improvement.

This EAP accreditation process, like all of COA's other accreditation products, is facilitative and open; COA wants to provide your organization with all the tools needed for ultimate success. COA and EASNA believe that our process is fair and COA stands ready to assist you every step of the way. Accreditation should not be viewed as an adversarial process, but as a structured means toward positive change.

Thank you again for your commitment to excellence.

Sincerely,

Michael H. Danjczek, Ed.D
Interim President and Chief Executive Officer, COA

Barbara Marsden
President, EASNA

Foreword

The Council on Accreditation for Children and Family Services, Inc. (COA) is the most comprehensive independent accrediting body for organizations that provide behavioral health care, social services, counseling, and other community services to families, children, and other individuals. At the time of publication, over 1300 organizations were either accredited or in the process of becoming accredited in the United States and Canada.

Begun in 1977 under the sponsorship of the Child Welfare League of America and Family Service America (now the Alliance for Children and Families), COA has grown to include the sponsorship of the Association of Jewish Family and Children's Agencies, Catholic Charities USA, the Foster Family-Based Treatment Association, Lutheran Services in America, Prevent Child Abuse America, National Council For Adoption, National Foundation for Consumer Credit, and the National Network for Youth.

The Employee Assistance Society of North America (EASNA), one of the most influential associations for employee assistance program (EAP) providers founded in 1989, partnered with COA in 2000 to develop landmark standards in the EAP industry. EASNA's decision to discontinue its longstanding accreditation program for its members and to endorse a new product designed by COA marked a crucial turning point in the history of EAPs in North America. By embarking on this joint venture, which drew heavily upon existing COA and EASNA standards, EASNA signaled to the field that EAP clients, much like those of other social and behavioral healthcare services, deserved to receive services from organizations that were willing to test their practices against those standards established by an internationally known and respected social service accreditor, COA. COA, who had previously accredited EAP services since 1987, also illustrated its support of this dynamic industry by institutionalizing its EAP accreditation through creation of a separate product specifically tailored for internal and external EAPs.

The EASNA EAP Accreditation Program, as administered by COA, is the product of an extensive and comprehensive review of existing best practices in the employee assistance field. An extensive literature search preceded rigorous beta testing at five sites, including Magellan, Ceridian, Bank of Montreal, EAP International, and the US Health Care Financing Administration. The results of this testing were embodied in a draft standards document which was then circulated among the foremost industry leaders through a notice and comment period. Like all of COA's accreditation products, the EAP Accreditation Program relied on extensive consensus-building processes and ensured that all relevant stakeholders had an opportunity to impart their comments in these evolving EASNA/COA EAP Accreditation Standards (Standards).

The final product is a comprehensive blueprint of best practices in the EAP field which addressed:

- **Administration and Management**, including EAP policies, personnel practices, and legal compliance;
- **Health and Safety**, including quality of the service environment and office safety;
- **Finance**, including financial information relevant to EAP services, and financial accountability;
- **EAP Legal Liability**, including issues related to insurance coverage and affiliate agreements;
- **Contracts for EAP Services,** including account management, program plans, and reports to customer organizations;

- **Quality Improvement**, including information management, internal quality monitoring, and external audits;
- **Personnel and Affiliate Competence**, including competence of counselors and credential requirements;
- **Staff Supervision and Training,** including supervision of staff and affiliates, and training content;
- **Professional Practice**, including protection of client rights, confidentiality protections, and ethical considerations related to web-based services;
- **Access to Service and Referrals**, including outreach and referral processes; and
- **Service Delivery**, including special practice requirements related to intake and assessment processes, as well as the specific practice principles that undergird quality in each of the EAP services delivered in today's market.

Organizations that seek accreditation under these Standards will be able to be accredited for:

- **Critical Incident Stress Management;**
- **Information and Referral and Assessment and Referral;**
- **Short-Term Counseling/Short-Term Problem Resolution;**
- **Organizational Development;**
- **Drug Free Workplace Services; and**
- **Legal Services**

ROLE OF ACCREDITATION

Private accreditation is a uniquely North American solution to the problem of assuring that the organizational service providers, whether in education, health care, or social service, meet the recognized standards of their domain and its professionals. The accreditation of the organizational providers is part of a larger system of quality control that includes the accreditation of training programs and institutions and the certification and licensing of individual professionals.

Accreditation identifies organizations in which consumers can have confidence. Accreditation also:

- provides evidence to the community that the organization providing service has met accepted standards of operation;
- identifies for private and public funders organizations worthy of financial support;
- generates knowledge upon which an effective organizational referral system can be built;
- establishes goals for organizational improvement; and
- protects the organization against pressures to lower standards.

At all times and especially when resources are limited, funds must be spent in efficient and effective ways which are consistent with the canons of good practice and management. Accreditation is a central means for assuring that this is accomplished.

INQUIRIES

COA welcomes all questions and suggestions regarding these Standards. Please contact the Director of Standards and Evaluation at COA, 120 Wall Street, New York, NY 10005.

ACKNOWLEDGEMENTS

The EAP Accreditation Program is the result of the collective wisdom of the foremost leaders in the EAP field. The development of these Standards could not have occurred without the immeasurable expertise and commitment provided by Dr. Dale Masi, Professor of Social Work at the University of Maryland School of Social Work and President and CEO of Masi Research Consultants. Dr. Masi is a true pioneer in the EAP field. She contributed significantly to the creation of these Standards through conducting an extensive analysis of existing literature in the EAP field and by integrating and modifying EASNA's and COA's sets of EAP standards. Furthermore, Dr. Masi provided technical advice and support to COA's Standards and Evaluation staff during the concentrated drafting phase of these Standards. Her willingness to lend her prodigious knowledge of the EAP field to this product was greatly appreciated. Dr. Masi's contributions were made possible, in part, through the support of the U.S. Center for Substance Abuse Prevention.

Many other individuals and organizations have encouraged and facilitated COA's efforts. EASNA's hardworking Standards Committee provided excellent suggestions for new standards and for refinement of existing material. EASNA Marilyn Hayman, chair of this committee, should be noted for her helpful comments on countless drafts of these Standards. Additionally, the members of two leading industry groups, the EAP Roundtable and the U.S. Center for Mental Health Services' Mental Health and EAP Industry Joint Initiative are to be thanked for their important input into this document. Both industry groups lent their informed vision for the EAP field through review of draft material. COA would also like to thank Charles Williams at the U.S. Center for Substance Abuse Prevention for leading the charge to codify the outstanding work of many EAPs through North America through the development of these Standards. Mr. Williams should be commended for his tenacious support of EAP accreditation and willingness to break new ground in this field.

Lastly, COA's Standards and Evaluation's prolific and talented staff are to be commended for their work to develop this product. Assistant Director Stephanie Pacinella spearheaded the research on dangling questions on content and ensured that the document met COA's requirements for editing and grammar. She has done an outstanding job executing the final phase of standards development, despite her recent entry into the Standards and Evaluation division. This couldn't have been done without you, Stephanie. A special thanks to standards writers Joe Frisino and Alisa Rulnick for their support on this project, as well.

Nicole F. Hazard, JD, MSW
Director of Standards and Evaluation

New York, New York
April, 2001

COA

GUIDELINES TO EAP ACCREDITATION

Instructions for Preparing the Self-Study Document

Preparing for the Site Visit

Accreditation Outcomes and the Decision-Making Process

1ST EDITION / VERSION 1.0

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COUNCIL ON ACCREDITATION
for Children and Family Services, Inc.
120 Wall Street, 11th Floor, New York, NY 10005
(212) 797-3000; fax: (212) 797-1428
email: coainfo@coanet.org

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INTRODUCTION

Welcome to the Employee Assistance Society of North America (EASNA) EAP Accreditation Program administered by the Council on Accreditation for Children and Family Services (COA)! COA and EASNA staff applaud your organization for its interest in improving the quality of services through accreditation.

The Guidelines to EAP Accreditation is a short primer on the COA accreditation process. It discusses the nuts and bolts of the accreditation process, from application, to site visit, and accreditation decision. It also extensively addresses how you should prepare your self-study manual—providing specific guidelines on producing a neatly prepared document that accurately captures your organization's compliance with the EAP Accreditation Standards (the Standards). Lastly, eleven appendices at the back of this primer provide additional guidance in understanding the Standards and evidence of compliance.

COA hopes that you find the accreditation experience to be a worthwhile and fruitful process. Dozens of accredited organizations have remarked over the years that accreditation has improved staff morale and instilled a new sense of professionalism. We hope that you will discover similar benefits through this experience.

Sincerely,

Nicole Hazard, JD, MSW
Director of Standards and Evaluation

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I. OVERVIEW OF THE EAP ACCREDITATION PROCESS

Application

EAP accreditation begins with the application process. The EAP completes an Application for Accreditation and returns it to COA, along with brochures and descriptions of the services offered by the EAP. COA then notifies the EAP of the acceptance of its Application in a Financial Agreement and COA assigns an Accreditation Coordinator to the EAP. The Accreditation Coordinator provides technical assistance and support throughout the process. An Accreditation Agreement is developed that outlines applicable services provided by the EAP. COA also establishes a timetable for the on-site review. Lastly, COA sends the Standards and Self-Study Manual (Manual), which contains the material and information necessary for the EAP to begin the self-assessment.

Self-Study

The self-study is a written document that the EAP will submit to COA at least eight (8) weeks prior to its site visit. The function of the self-study is to provide a basis for the review team to evaluate the EAP's compliance with the Standards. Development of the EAP's self-study document is addressed more fully in section II., Preparing the Self-Study Document.

Prior to the site visit, the peer reviewers will assign a preliminary rating for each standard based upon their review of the EAP's self-study. They will use the four-level rating indicators described in Appendix B to the Guidelines. These indicators provide added guidance to the EAP about COA's expectations.

Site Visit

The site visit process is a facilitative effort—not an audit. The on-site review allows the peer review team to verify compliance with the applicable standards. The on-site review provides the second major opportunity for the EAP to demonstrate that its policies, procedures, and practices comply with the Standards. Prior to the site visit, the peer review team reads the self-study and familiarizes itself with the EAP's structure and services. During the site visit, the team will conduct activities intended to verify and clarify information contained in the self-study. Such activities include client record review, staff interviews, personnel record review, facility inspections, meeting with members of the board of directors, owners, and other senior management, contact with stakeholders, and review of board of directors minutes. While on-site, the review team finalizes the level of compliance it assigns for each standard.

The EAP will receive the accreditation report within forty-five (45) days following the site visit.

Accreditation Commission

The Accreditation Commission is COA's volunteer accreditation decision-making body. It is comprised of professionals nominated and elected by COA's Board of Trustees. All Accreditation Commissioners must have knowledge and skills required to review EAPs for accreditation.

It is the Accreditation Commission's prerogative to upgrade (3 to 2) or downgrade (2 to 3) ratings, when it deems it appropriate to ensure consistency and reliability of the decision-making process. The Accreditation Commission can withhold the decision to accredit/reaccredit based upon any single third order standard being out-of-compliance. The peer review team is provided a copy of the decision notification letter that is distributed to the EAP.

More information on the Accreditation Commission and decision-making process is provided in section IV., Accreditation Decisions and the Decision-Making Process.

II. PREPARING THE SELF-STUDY DOCUMENT

As discussed in I. Overview of the EAP Accreditation Process, the EAP's self-study document presents a comprehensive overview of the EAP's operations and services. It is the EAP's first opportunity to demonstrate compliance with the Standards. Proper assembly of this document is the first step to a successful site visit.

A. Getting Started

COA recommends that the EAP begin the self-study process by appointing a task force or coordinating committee that, along with the chief executive officer or designee, will plan the preparation of materials for the self-study and site visit. This group should include representation from the board of directors, owners, other senior management, and personnel. It may be efficient to divide into subcommittees or to use existing committees to help prepare accreditation materials.

Typical Sub-Committees	
Management	Fiscal Management
Personnel	Service Delivery
Strategic Planning and Quality Improvement	

Other committees may be added according to the EAP's size and complexity. Subgroups addressing each specific service may be appropriate.

In organizing their work, these groups should:

1. **Divide responsibility** for various tasks, make specific assignments, and set internal deadlines, keeping in mind the amount of time required to assemble a final document and meet the overall deadline for submission of the self-study document to COA.

2. **Appoint a task force coordinator** to track assignments and work completion. The coordinator's responsibilities are similar to those of any project manager. S/he would most likely report directly to the chief executive officer. The coordinator's responsibilities may also include assembling and editing the final drafts of the self-study.

B. Overview of Required Activities

Required activities include:

1. Address all applicable standards;
2. Address all potential not-applicable ratings;
3. Gather Information;
4. Complete Forms and Questionnaires; and
5. Document Compliance.

1. Address All Applicable Standards

The EAP should address every applicable standard, collecting and appending the required documentation of compliance.

- Unless otherwise indicated, the phrases "as needed" or "as appropriate" used in a standard means "as appropriate to the client." The EAP must demonstrate how it complies with the standard for those individual persons or eligible participants for whom the standard is applicable. These terms should not be broadly interpreted to mean that the standard is "not applicable" to the EAP. 70-6 is an example:

  70-6. At intake, the legal services provider explores other issues relevant to the referral and makes referrals back to the EAP, as appropriate.

- **The EAP must also review COA's website for notice of standards interpretations and clarifications.** All replacement pages will be available on the website.

2. Address All Potential Not-Applicable Ratings

> The EAP should never decide on its own that a standard is not applicable unless a rating of NA is explicitly permitted. Please use the NA request form provided in Appendix K to inquire about an exception to a standard that is not explicitly permitted in the rating indicators.

If a rating of NA is permitted and the EAP determines that a rating of NA is applicable, the EAP must still be prepared to provide evidence that supports that determination. This can be done pre-site or on-site depending on the given standard. For example, a standard that allows an NA for EAPs that do not provide legal services is easily validated through pre-site materials. In some instances an NA appears after the first or second order standard, if the EAP determines that the NA is applicable, then the EAP would skip the entire section and proceed to the next section. For example, if the EAP determines the NA under 68. Drug Free Workplace Services is applicable, the EAP would skip the entire section and proceed to the next section, 69. Work-Life Services.

Special Not Applicable Considerations

- Additionally, the NA options listed in the Manual do not cover every possible situation in which a rating of NA may be permitted. The EAP should use the NA request form in cases where, due to the unique way its service delivery system operates, an NA should be considered. In many situations, the standard can be interpreted in such a way as to apply to the EAP's particular circumstances.

3. Gather Information

In order to demonstrate compliance with the Standards the EAP must gather information from a variety of sources during the self-study process:

- *From within the EAP itself:*

Prior to the site visit, the EAP will gather information in the form of copies of policies, procedures, organizational materials, and complete a number of forms and questionnaires found throughout the Manual.

During the site visit the review team will observe the facility and the EAP's services, interview clients when permissible, board of directors members, owners, other senior management, and personnel. The review team will also extensively review documents and records, and ask questions about organizational operation to identify additional information and documentation that supports pre-site information in the self-study document.

- *From other stakeholders:*

The EAP will solicit input from other organizations in the EAP field through a stakeholder questionnaire provided by COA. The EAP will distribute the questionnaire to stakeholders familiar with its work and these organizations will return their completed responses directly to COA. The peer review team will conduct additional follow-up contacts during the site visit, as needed.

- *From clients:*

The EAP will solicit input from persons and eligible participants served by the EAP. The review team will also interview clients while on-site, when permissible.

4. Complete Forms and Questionnaires

The Manual includes a number of checklists, forms, and questionnaires that support the accreditation process and provide an additional process that augments pre-site documentation.

All tools are located at the back of this document.

Type of Instrument	Examples	Purpose	Where to Submit
Forms	• List of Administrative Personnel • Aggregate Job Category Form	To summarize performance in specific organizational domains or services.	Forms must be submitted at the beginning of the evidence of compliance for each section. Forms can be reproduced as often as necessary.
Questionnaires	• Questionnaire for Customer Organizations, Host Organizations, Subcontractors, and Other Stakeholders. • Client Questionnaire • Personnel Questionnaire	To gather information from various stakeholders on organizational performance.	The EAP must submit the questionnaires to relevant stakeholders who, in turn, mail the information directly to COA.

Forms and Questionnaires

The Manual includes several charts and forms that the EAP must complete and distribute to appropriate stakeholders.

Note: In all cases the EAP must write in its full name and address, including the addresses of branch sites, as appropriate, on forms and questionnaires before distributing them to the identified individuals or organizations. Every day COA receives dozens of forms and questionnaires. If these forms do not include the organization's complete name and address, it is difficult, and in some cases impossible, to identify the organization to which these self-study documents belong.

• The Questionnaire For Customer Organizations, Host Organizations, Subcontractors, and Other Stakeholders.

Using criteria set forth by COA, the EAP is asked to poll stakeholders on its public perception. The EAP directly distributes the Questionnaire for Customer Organizations, Host Organizations, Subcontractors, and Other Stakeholders and an explanatory memo to these organizations. A list of the selected organizations is submitted to COA as part of the EAP's self-study. Organizations are asked to send their responses to the questionnaire directly to COA.

• The Client Questionnaire

The Client Questionnaire addresses important information on ethical practice that is addressed in the Standards. Each sampled client is to be given a copy

of the questionnaire with a cover letter and a stamped envelope addressed to COA. The EAP should enter its name on the questionnaire form before distribution.

At least 100 clients are to be randomly selected from the service population. This sample must be spread evenly over the range of services offered by the EAP. The EAP may choose its own means of random selection: a simple way to sample is to give questionnaires to the first two clients seen each day of a given week. The EAP should be prepared to explain its sampling method during the site visit.

- **The Personnel Questionnaire**

  The Personnel Questionnaire should be completed by employees. As with other COA questionnaires, the sample drawn must be representative, i.e., direct service workers, clerical staff, management, and leadership must be sampled. The sample should not exceed 250 respondents. Prior to photocopying the form for each respondent, the EAP should insert its name where indicated. The EAP should provide each respondent with a stamped envelope addressed to COA and instructions to return the form promptly.

- **The List of Personnel**

  The List of Personnel includes the CEO and other senior management, and all support staff not providing a direct service.

- **The Aggregate Job Category Form**

  The Aggregate Job Category Form captures information on administrative and management staff, as well as totals for all services provided within the EAP. In addition to other information, the Aggregate Job Category Form compiles information on staff ethnicity and turnover rate, among other variables.

5. Document Compliance

Each third order standard, and in some cases a second order standard, is followed by two subsections related to that standard (see Appendix A: Sample Page from the Self-Study Manual): interpretation and evidence of compliance.

- **Interpretation**

  Interpretations of the standard may be found directly under a second or third order standard. An interpretation provides elaboration of whole standards or elements/components within a given standard. It may also provide useful examples of how to comply with the standard it clarifies. Importantly, the EAP must

comply with the content of an interpretation, unless it is clearly framed as an example.

- **Evidence of Compliance**

  This subsection is found directly beneath the standard itself and describes the evidence that the team will review either pre-site, as part of the EAP's written self-study document, and/or while on-site.

C. Steps in Producing the Self-Study Document

Please read the following steps carefully. In order to facilitate the review process COA requires that the EAP's self-study document be prepared according to the following guidelines. Do not be creative. Before beginning, the EAP should consult the "service agreement" received from COA to verify the services for which the organization will be reviewed. Please contact your accreditation coordinator if a change in service delivery occurs. If this change is not communicated, it is possible that your site visit could be postponed at the EAP's expense.

Note: **If the self-study is not prepared according to these guidelines it will be returned and could result in the postponement of the EAP's site visit.**

THE FOLLOWING STEPS SHOULD BE REPEATED FOR EACH SECTION OF THE MANUAL.

Step 1. For each standard, review the evidence of compliance, and prepare any documentary evidence, including forms or other tools required to demonstrate compliance.

If reference to a policy or procedure is required to demonstrate compliance with the standard, please attach only the specific material that is necessary to demonstrate compliance. Do not send additional material (such as the entire personnel manual). The full manual must be available on-site.

Step 2. The information below should be organized as follows:

Assemble the completed sections of the Manual, including the related tools in sequential order in three-ring binders, or separately in individual hard-back binders, one for each section as follows:

INSERT TAB

Place clearly labeled tabs or other dividers in between each complete section, e.g., Administration and Management, Health and Safety.

PLACE AFTER TAB THE FOLLOWING:

a. **COPY OF STANDARDS FOR THAT SECTION:** Insert a complete copy of the applicable section from the *Manual.* DO NOT PAGINATE UNTIL ALL PRE-SITE DOCUMENTATION IS APPENDED.

b. **TOOLS:** Place any completed forms or tools required.

c. **PRE-SITE DOCUMENTATION:** Append all pre-site evidence in the order in that the standards appear, e.g., evidence for 1-4 should be in front of evidence for 1-5. Do not arrange documentation by type, e.g., all policies together, all procedures together, all minutes together. Provide documentation for any NA's that require further elaboration.

d. **LABEL:** Place the standard number on the upper right hand corner of each piece, not page, of evidence. Label each piece of evidence for all standards that apply, e.g., if the statement of understanding is the evidence for 40-2 and 40-6, place all third order references on the upper right hand corner of the first page of the document.

e. **PAGE NUMBERS:** Number the pages in the bottom right hand corner of each section. Page 1 should correspond to the first piece of supporting documentation supplied for the first third (or in some cases second) order in a section. Pages should be numbered sequen-

tially using whole numbers, beginning with the first page of the first piece of evidence for the first third order standard in the section and ending with the last third order standard for the last second order standard in the section, e.g., for the Health and Saftey section, 10-1. – 11-5.

f. **COLORED PAPER:** Place a sheet of colored paper in between each piece of evidence submitted. Do not number the colored paper dividers.

INSERT NEXT TAB: REPEAT
Place a clearly labeled tab at the beginning of the section and repeat.

Step 3. Finally, send a copy of the entire self-study document to each member of the review team, a copy to COA, and keep a copy for on-site use by the review team.

Once the self-study is organized, check the final document for completeness.

When the self-study is submitted, it should be complete in every respect. Make sure that:

- all applicable services have been addressed;
- the document is assembled according to COA's instructions;
- all sections in the *Manual* have been reproduced and included;
- all listed documentary evidence is provided;
- all forms and questionnaires have been sent or completed as per the instructions; and
- the presentation of material is professional and secure (e.g., pages are not falling out because too much material is submitted in one binder).

III. PREPARING FOR THE SITE VISIT

A. General Information

Approximately six to eight weeks after the EAP submits to COA its completed self-study, a team of two or more peer reviewers will conduct a site visit. This on-site review provides the second major opportunity for the EAP to present evidence that its policies, procedures, and practices comply with the Standards.

Prior to the site visit, the review team will closely review the self-study. The review team will be very familiar with the EAP by the time it arrives on-site.

The review team consists of experienced professionals who have been trained in COA's process and who, as a team, have the requisite experience to review the EAP's services.

On-site, the team will conduct activities intended to verify and clarify the information contained in the self-study. Such activities include, for example, client record review and staff interviews for which on-site review is essential. While on site the review team will determine the level of compliance for each standard.

The evidence of compliance in the Manual specifies the on-site activities that the team will conduct. At its discretion, the review team may conduct additional on-site activities to determine compliance with the standards.

B. Site Visit Arrangements

Prior to the site visit , COA will confirm with the EAP the number, names, and addresses of the peer reviewers that will comprise the review team. As described above, the EAP will ship one full copy of the completed self-study to each peer reviewer by an agreed upon date. If delays are unavoidable, please notify COA personnel immediately to avoid unnecessary inconvenience to the peer reviewers and additional cost to the EAP.

Prior to the site visit the EAP should carefully review the on-site requirements and make sure that the organization is prepared and organized for the visit. Many organizations find that a mock survey or run-through of the site visit prior to the team's arrival is useful. This may help identify a need for further preparation in certain areas of organization operations. **Additionally, the EAP should check COA's website for any up-to-date information on preparation of files for record review, or any other relevant information.**

C. Material to Have Available On-Site

The EAP should be prepared for on-site validation of compliance with all applicable standards. The following documents should be assembled and labeled (e.g., numbered or otherwise identified) and made readily available to the review team while it is on site.

- a copy of the **completed self-study** document including all sections;
- all applicable **licenses;**
- **a record of compliance with applicable laws and regulations cited** in the standards;
- the EAP's **annual report**;

- copies of **contracts and/or written agreements** with other organizations and/or consultants;
- the **personnel manual**;
- **personnel records** (the peer review team will randomly select these records);
- **training materials and training attendance records** for the last year;
- the **operations manual** and/or **policy and procedures manual**;
- a **board manual**;
- signed **board of directors meeting minutes**;
- signed **QI minutes and materials** for all committees including attendance sheets;
- a full set of **job descriptions**;
- **client grievance records**;
- **financial records**;
- **critical incident and accident reports**;
- **client records** (the peer review team will randomly select these records);
- **additional pre-site documentation** as applicable.

Reminder: Please include with your self-study only the specific material that is necessary to demonstrate compliance.

IV. ACCREDITATION DECISIONS AND THE DECISION-MAKING PROCESS

A. How the Review Team Assigns Ratings

As a result of its findings, the review team will prepare a report in which it rates the EAP's compliance with each applicable standard against COA's 4-point rating scale.

Third Order Standards

The review team assesses compliance by starting with the third order standards. These are the most measurable, specific standards.

The team will use the Rating Indicator Legend, provided in Appendix B, as a guide in assesing compliance for that standard.

The peer reviewers use their professional judgment and expertise in applying the rating indicators as they assign ratings for each third order standard. Each organization is unique, making it both impossible and undesirable for COA to apply a rigid formula for assessing the wide variety of circumstances presented by the many different organizations it accredits. However, one purpose of the rating indicators supported by research findings is to increase inter-rater reliability and ensure that like situations are treated as similarly as possible by different review teams.

If the team decides to apply a rating of partial compliance (3) or non-compliance (4) to a third order standard, it must provide a written, objective reason for the rating. The EAP will have an opportunity to respond to ratings of partial compliance or non-compliance following the site visit.

Second Order Standards

Once every third order standard under a given second order standard has been assigned a rating, the peers rate the second order standard.

The peer reviewers are instructed to use their professional judgment in assigning the compliance ratings.

Peer reviewers do not rely on a mathematical average or mean of the associated third order ratings to assign the second order rating. There may be cases when the second order rating deviates significantly from an average of the third order ratings. It is significant to note that particularly important third order standards may be more heavily weighted in the assignment of the second order score. As such, a rating of 3 on one third order among several ratings of 2 may very well result in a second order score of 3. These situations often occur when a critical health or safety third order standard exists among other standards.

The peers follow rules that govern the assignment of ratings. These rules preclude the assignment of a rating of 1 at the second order if there are any 3s or 4s at the third order level. Similarly, a rating of 1 at the first order is prohibited if there are any ratings of 3s or 4s at the second order level.

First Order Standards

Ratings for all the second order standards must precede the assignment of a rating to the first order standard. The first order standard's score is equivalent to the assignment for the entire section. The rating assignment process parallels that used for arriving at the score for a second order, with one significant difference. At the first order level, COA provides direction regarding the relative weights to be assigned to the second order standards. This is where the mandatory and critical standards become relevant (see below):

The team will weight the ratings of mandatory and critical second order standards more heavily when determining a rating for the first order standard.

B. Weighted Standards

The most important factor used by COA in reaching an accreditation decision is the EAP's level of compliance with the mandatory and critical standards. Together, these comprise COA's system of weighted standards.

The mandatory and critical standards describe a core set of the essential elements that are indicative of quality organizational practice. All of the standards are important for the operation of a well-functioning EAP and EAPs must strive to comply with them. However, some standards are more important than others, and an EAP's failure to comply with the mandatory or critical standards reflects a fundamental weakness in its operations.

- **Mandatory Standards**

  The EAP must be in full or substantial compliance with all mandatory standards.

- **Critical Standards**

  The EAP must comply with 85% of all critical standards. Furthermore, it cannot receive a rating of 3 or 4 on more than one critical second order in any one section.

- **Third Order Standards**

  The EAP must comply with 85% of all applicable third order standards.

  See Appendix C for a list of mandatory and critical standards.

COA reserves the right to defer or deny accreditation on the basis of a single standard if there is serious cause for concern.

It is the responsibility of the EAP undergoing accreditation to be familiar with the mandatory and critical standards and to be aware of their potential impact on the accreditation decision. In the body of the *Manual,* mandatory standards are denoted by one asterisk and critical standards are denoted by two asterisks.

C. The Preliminary Accreditation Report (PAR) and the EAP's Opportunity to Respond

Following the site visit, the review team will submit a preliminary accreditation report (PAR) to COA that includes the ratings for the sections. The EAP will receive a copy of this report within 45 calendar days following the site visit.

The EAP has 45 calendar days from the receipt of the report to provide a response to the preliminary accreditation report. COA will give the EAP's report and its response to the Accreditation Commission, the body which will make the final determination regarding accreditation. This is the EAP's third major opportunity to provide COA with evidence that it complies with the standards.

Please note that COA interprets an organization's lack of response to a rating of 3 or 4 as agreement with the review team's assessment.

While it is strongly advised that the EAP respond to each rating of partial (3) and non-compliance (4) assigned to a standard, it is especially important that it respond when such ratings are assigned to mandatory and critical standards. Even a **single** rating of partial (3) or non-compliance (4) with a mandatory standard following the Accreditation Commission's review **will** result in a delay in achieving EAP accreditation.

Typical reasons for responding to the preliminary accreditation report (PAR)

1. The EAP completed its efforts towards compliance during the 45-day period following its receipt of the report.

   Note: This additional evidence should clearly demonstrate that the EAP is currently in compliance with the requirements of the standards – written expressions of the EAP's intent to meet the standard are not sufficient.

2. The review team was not able to find the necessary information or evidence even though it was available at the time of the site visit.

3. There is disagreement with the review team's interpretation of the standard as it applies to the EAP's situation.

The only material regarding the EAP that will be available to the Accreditation Commission for its review is the preliminary accreditation report, any material supplied by the EAP in its response to that report, and the peer review team's evaluation of the EAP's response to the preliminary accreditation report. The Accreditation Commission will not have a copy of the EAP's self-study, so any material from the self-study that the EAP would like the Commission to consider should be copied and submitted as part of its response.

Note: The EAP's response to the PAR must be organized and formatted according to COA's instructions. COA will not accept responses that are not prepared in accordance with the guidelines. For instructions on preparing a response to the PAR, see Appendix D, Guide to Responding to the Preliminary Accreditation Report (PAR).

To ensure the integrity of the Commission's decision regarding the EAP's accreditation, the preliminary accreditation report and its response will be reviewed anonymously by the Commission.

A code will be assigned to the EAP by COA staff and all information identifying the organization will be deleted from the preliminary accreditation report prior to the Commission's receiving it. To assist COA and facilitate this process, the EAP must delete all organization-identifying information from the supporting material included with its response. This identifying information includes the EAP's name, state, all names of clients, and the last names of all personnel and board of directors members.

D. The Accreditation Decision

If the EAP meets all elements of COA's system of weighted standards, the recommendation will be, in almost all cases, to accredit.

Accreditation Decisions

- **Accreditation** for a three or four year period.
- A current **accreditation continued in probationary status for up to one year.**
- A current **accreditation suspended with 90 days to correct deficiencies.**
- **Denial or withdrawal of accreditation.**

The Accreditation Commission may defer the accreditation decision to:

- **gather additional information**, if the Commission is unclear about demonstration of compliance; or
- **require additional remediation**. An accreditation decision will be deferred under these circumstances if the EAP does not meet the requirements of COA's Weighting System. The time allowed to demonstrate compliance for matters under remediation shall not cumulatively exceed 12 months, regardless of the number of deferrals.

An appeals process is available for any organization whose accreditation is denied or revoked. COA's Board of Trustees or its Executive Committee formally acts on all recommendations of suspension, denial, or revocation of accreditation by the Accreditation Commission.

APPENDIX A:

Sample Page from the Standards and Self-Study Manual

FIRST ORDER — ADMINISTRATION AND MANAGEMENT
Sections 1-9

SECOND ORDER — **1. LEGAL COMPLIANCE***

THIRD ORDER — **1-1. The EAP complies with all applicable federal and state or provincial, and local laws and regulations.**

Evidence of Compliance

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 (CEO) or a senior management representative.

THIRD ORDER — **1-2. EAPs that operate in foreign countries comply with the relevant statutory, regulatory, and administrative requirements of their respective locations of operation.**

Interpretation:

This standard applies to multinational corporations that serve employees overseas, as well as EAPs that are incorporated in a foreign country.

Evidence of Compliance

ON-SITE
The team will interview the CEO or a senior management representative.

NA The EAP is based in the United States or Canada.

THIRD ORDER — **1-3.** The EAP's licenses, business registrations, tax returns, and other documentation of its lawful operation are valid and in good standing.

Evidence of Compliance

ON-SITE
The team will review relevant documents and interview the CEO or a senior management representative.

THIRD ORDER — **1-4.** 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

PRE-SITE
Provide a description of any pending corrective actions, as applicable.
ON-SITE
The team will interview the CEO or a senior management representative.

1ST EDITION \ VERSION 1.0 \ ADMINISTRATION AND MANAGEMENT 1

APPENDIX B: RATING INDICTOR LEGEND

COA uses a four-level series of indicators to guide the review team in determining the EAP's compliance with the standard.

COA Rating Indicators	
1	Full Compliance
2	Substantial Compliance
3	Partial Compliance
4	Non-Compliance
NA	A rating of not-applicable is also possible, where permitted

Ratings of (1) and (2) are considered "passing."

The following expands on the rating indicators present for each third order standard.

1 Full Compliance

Explanation: The EAP's policies, procedures, and/or practices, whichever is addressed, fully meet the standard as written. All elements or requirements are evident in practice. There is little or no deviation from the standard. Exceptions in compliance are extremely rare and do not impact in any observable way on quality of service or organizational performance.

Examples

- Practice is consistent and competent, in accord with any policies or procedures
- Services are well designed and well executed
- Documentation is excellent
- Stakeholders are actively involved in service planning and execution
- Exceptions are clinically justified and are clearly and thoroughly documented
- Hours of operation and facilities are appropriate to the population served
- Training has appropriate comprehensiveness and depth, is current and specific, and is appropriate to the group's knowledge and skills
- Training occurs at initial assignment
- Training is offered at convenient times and locations
- 90% or more client records meet the standard's requirements

2 Substantial Compliance

Explanation: The EAP meets the majority of the standard's requirements, but one or more factors are missing or need augmentation to achieve full compliance. Practice is basically sound. The EAP must have implemented the basic framework required by the standard to achieve a rating of 2. For example, policies, procedures, or practices, as appropriate, must be in existence to be rated a two. Absence of such infrastructure requires the peer to assign a rating of three or lower.

A rating of two reveals some minor inconsistencies in practice, but such inconsistencies do not jeopardize clients or overall performance in any way.

Examples

- An aspect of compliance could be strengthened, e.g., the EAP's personnel policies state that it will not unlawfully discriminate against any person or category of persons protected by law, but the peers discover that the EAP has not reviewed such laws recently (but plans to do so in the near future) despite nationwide changes in such legal requirements
- Over 90% of personnel meet the standard's requirements. Additional supervision is provided and tasks are assigned appropriate to the practitioner's level of experience and education. Many of the 10% who do not meet the standard are working toward it or have extensive experience that compensates for the absence of the degree

- One of several required elements is not met and such element does not jeopardize health or safety
- A training curriculum exists but is not implemented as often as necessary
- 85-89% of client records sampled meet the standard

3 Partial Compliance

Explanation: A significant aspect of the EAP's operations deviates from the standard's requirements. For a rating of three, significant omissions or exceptions to the standard occur with regularity or procedures are weak. The EAP has not implemented the basic framework required by the standard, but instead has parts of this framework. A rating of three is assigned when the peer reviewer determines that, with reasonable effort, a rating of two can be achieved.

Moreover, often a rating of three is assigned when the standard requires written documentation but the EAP can only anecdotally describe how it meets the standard. Another common situation where a rating of three is assigned occurs when organizational practice, as is, may compromise care of clients or organizational functioning.

Examples

- Necessary administrative or service reviews are conducted but appear cursory and/or without depth
- Practice significantly deviates from written procedure
- Despite the existence of procedure, personnel are poorly informed about procedures or reporting relationships to the extent that practice suffers significantly
- Procedures are superficial
- Procedures required by the standard are non-existent but the standard is met in practice
- One important element of the standard is not met, although other elements are met, and this aspect is essential to compliance with the standard
- The standard addresses qualifications of staff, but the EAP's staffing patterns deviate from the standard and there is an absence of a mechanism for increased supervision or coverage
- 75-84% of client records sampled meet the standard

4 Non-compliance

Explanation: Practice or documentation does not completely address, or is in opposition to, the standard's requirements. Few, if any, of the standard's requirements are met. Or, in certain cases, a vital element to the standard is not addressed. The EAP does not have any of the necessary components of the basic framework the standard requires. This may be due to glaring lack of attention to practice or service delivery, or administrative decisions that are not consistent with the standard.

Omissions or exceptions occur so frequently that they are the norm. Organizational functioning or integrity is seriously compromised. Health and safety of clients is, or is close to being, jeopardized.

Examples

- Documentation or summaries are consistently missing
- Practice appears driven by need for resources rather than by service needs
- There is pervasive insensitivity to the rights of clients
- Clients receiving service are impaired in instances where unqualified persons occupy key positions or deal with vulnerable persons
- Several required activities are not conducted
- Fewer than 75% of client records meet the standard

APPENDIX C: WEIGHTED STANDARDS

First Order Standards

All first order standards are mandatory. The first order standard is a general topic heading in capital letters at the beginning of the section. The rating for a first order standard is analogous to a rating for the entire section.

Second Order Standards

Mandatory Second Order Standards

The following second order standards are mandatory for all EAPs:

1. Legal Compliance
4. EAP Policies
5. Program Description
7. Human Resource Policies
14. Financial Accountability
18. Record-Keeping Practices and Procedures
19. Affiliate Agreements
20. Contractual Agreements
23. Reports to Customer Organizations
25. Quality Improvement Infrastructure
29. Individual Outcomes
34. Credential Requirements
39. Training Content
40. Protection of Rights
41. Access to Files and Records
43. Confidentiality and Privacy Protections for Clients
44. Releases
49. Client Protections Related to Research
58. Client Records
60. General Assessment Requirements
61. Clinical Assessments
63. Critical Incident Stress Management
64. Information and Referral, and Assessment and Referral Services
65. Training of Supervisors and Union Representatives
66. Short-Term Counseling/Short-Term Problem Resolution
67. Organizational Development
68. Drug Free Workplace Services
69. Work-Life Services
70. Legal Services

Critical Standards

The following second order standards are critical for all organizations. Organizations must be in compliance with 85% of all critical standards. In addition, an organization may not be out of compliance with more than one critical standard in any section.

6. Personnel Practices
11. Office Safety and Security
12. Financial Information
13. Financial Statements
17. Liability Insurance
24. Contract Management with Customer Organizations
26. Information Management
27. Evaluation of Performance
28. Internal Quality Monitoring
30. External Audits
36. Supervision of Staff and Affiliates
37. Supervision of Non-Clinical Personnel
38. General Staff/Affiliate Training and Development Requirements
42. Grievance Procedures
45. Conduct of Staff and Affiliates
50. Ethical Considerations Related to Web-Based Services
52. Access Procedures
55. EAP Service Design
56. Special Service Delivery Considerations
57. EAP Staffing Patterns and Ratios
59. Intake Process
62. Clinical Services

Third Order Standards

The organization must be in compliance with 85% of all applicable third order standards.

APPENDIX D

Guide to Responding to the Preliminary Accreditation Report (PAR)

The response the EAP submits to the PAR must be organized and formatted according to COA's instructions. COA will not accept responses that are not prepared in accordance with the following guidelines.

Format of Response

- ☐ Return a copy of the entire PAR to COA with each response to a specific standard placed directly behind the section that it applies to.
- ☐ **Do not** include double-sided pages and **do not** submit the responses on colored paper.
- ☐ Redact the following information from the response to the PAR:
  a. EAP's name and address (including all references to the city and state);
  b. the name of the Executive Director/Chief Executive Officer;
  c. the last names of clients, staff, and board of directors members; and
  d. all references to the EAP and its location on the EAP's letterhead.
- ☐ **Do not** staple, binder clip, or otherwise bind any pages in the EAP's response.
- ☐ Do not place the response pages in plastic or protective sheets or use tab dividers.
- ☐ Separate each section by placing a sheet of paper between the sections or documents and label it accordingly.
- ☐ The EAP must page number the PAR and the EAP's response to the PAR. Begin the page numbering on the first page of the PAR and continue numbering consecutively until the last page of the response.
- ☐ **Do not** provide duplicate copies of documents. If the EAP chooses to reference a document that has already been submitted, insert a page referring to the name of the document and the applicable page number where it is located in the response. The Accreditation Commission will not change ratings of non-compliance if it is unable to locate the appropriate documentation

Content of the EAP's Response

- COA strongly recommends that the EAP respond to each standard rated out of compliance. The Accreditation Commission can withhold accreditation on the basis of any single third order standard. The EAP should always respond to third

Tool List
Tool Instructions
Questionnaire for Customer Organizations, Host Organizations, Subcontractors, and Other Stakeholders Directions Letter List of Recipients Questionnaire
Client Questionnaire Letter Questionnaire
List of Personnel
Aggregate Job Category Form
Personnel Questionnaire Letter Questionnaire
Not Applicable "NA" Request Form

APPENDIX E:

Tool List and Instructions

Tool List
Tool Instructions
Questionnaire for Customer Organizations, Host Organizations, Subcontractors, and Other Stakeholders Directions Letter List of Recipients Questionnaire
Client Questionnaire Letter Questionnaire
List of Personnel
Aggregate Job Category Form
Personnel Questionnaire Letter Questionnaire
Not Applicable "NA" Request Form

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Tool Instructions

Tool	Instructions
Questionnaire for Customer Organizations, Host Organizations, Subcontractors, and Other Stakeholders	See "Mailing Directions for the Questionnaire for Customer Organizations, Host Organizations, Subcontractors, and Other Stakeholders."
Client Questionnaire	Distribute the *Client Questionnaire*, along with the explanatory memo, and a stamped envelope addressed to COA, to at least 100 clients, with no fewer than 25 per service but no more than 250 clients total. Completed questionnaires will be returned directly to COA by the client, so the EAP must enter its name on the questionnaire form before distributing it to clients. The clients are to be randomly selected from the service population. The sample should be spread evenly over the range of services provided by the EAP. The EAP may choose its own means of random selection: a simple way to sample is to give questionnaires to the first two clients seen each day of a given week. An EAP must be prepared to explain its sampling method during the site visit. A Spanish language version of the survey is available from COA upon request.
List of Personnel	Include the CEO and other senior management, and all support staff not assigned to a specific service.
Aggregate Job Category Form	The Aggregate Job Category Form is a two-part form. The first part of the form captures information on staff positions for administrative and management, and the second part of the form captures information services provided by the EAP.
Personnel Questionnaire	**EAPs with fewer than 250 personnel** distribute the questionnaire and the explanatory letter to all personnel and affiliates. **EAPs with more than 250 personnel** distribute no more than 250 questionnaires to personnel and affiliates. Draw a

	representative sample of counselors and other direct service workers, clerical and support staff, and management. Completed questionnaires are to be returned directly to COA, so the EAP must enter its name on the questionnaire form before distribution. Provide each respondent with a stamped envelope addressed to COA and instructions to return the form promptly.
Not Applicable "NA" Request Form	See instructions on the form.

APPENDIX F:

Questionnaire for Customer Organizations, Host Organizations, Subcontractors, and Other Stakeholders and Associated Materials

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Mailing Directions for the Questionnaire for Customer Organizations, Host Organizations, Subcontractors, and Other Stakeholders

The EAP must complete the following steps:

1. Identify organizations that fit the descriptions below.

2 Distribute copies of the Questionnaire for Customer Organizations, Host Organizations, Subcontractors, and Other Stakeholders (Stakeholder Questionnaire) and the accompanying explanatory memo to all organizations identified. **The EAP must enter its name in the space provided on both the questionnaire and the explanatory memo, prior to distribution.**

3. Send the Stakeholder Questionnaire to the organizations listed in the chart below.

4. Submit the names of all organizations that received the Stakeholder Questionnaire to COA with the completed self-study using the form on the following page.

✓	**Organizations to Receive the Questionnaire**
	Each organization with which your organization has a **purchase-of-service contract**, either as a purchaser or provider of service (e.g., customer organization, legal services provider etc.).
	Ten organizations, other than those with whom you contract, to which or from which **clients are most frequently referred**.
	All local, state, or provincial organizations to which you are accountable for **regulatory, licensing, or monitoring** purposes.
	Schools or universities with which the organization has a professional training arrangement, undergraduate or graduate.
	The local chapter of EASNA, EAPA, or the local chapter of another appropriate professional organization.
	All local chapters of **unions**, if applicable.
	Other organizations that can help COA gain an accurate idea of your EAP's role in the community.

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Survey of Your Opinions Concerning:

EAP: _____

To: Colleague

From: Council on Accreditation
120 Wall Street, 11th Floor
New York, NY 10005
212-797-3000

The Council on Accreditation (COA) is conducting an accreditation study of the above EAP and seeks your assistance. A part of the study consists of asking organizations in the community about their experience with and impression of the EAP's services.

Your response to questions on the enclosed form will become part of the composite picture of the EAP. You may respond as a general observer of how the EAP is seen in the community, as someone with direct experience with the EAP, or from both perspectives.

COA requests that, if possible, you select an individual to complete this form who has had direct knowledge or experience with the EAP being studied. If you wish to make additional comments, please attach a separate sheet.

Your participation in this study will be a service to the EAP and its clients. *COA assures you that your response will be held in confidence.* If you have any questions about the accreditation process or wish to learn more about COA, please call the number listed above.

Please return this questionnaire directly to COA, Attention COA Mailroom, at the address listed above.

Your help in this matter is greatly appreciated.

Enc.

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Organizations Sent the Questionnaire for Customer Organizations, Host Organizations, Subcontractors, and Other Stakeholders

Use Additional Sheets As Necessary

Name of EAP Being Accredited:_____City/State:_____

Organization	Relationship Customer Organization, Subcontractor, etc.	Address	Phone Number	Contact Person

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Questionnaire for Customer Organizations, Host Organizations, Subcontractors, and Other Stakeholders

Please return to: COA, 120 Wall Street, 11th Floor, New York, NY 10005, Fax 212-797-1428

Date: _____

EAP Name:

City: State/Province:

Name of person responding: _____

I am:
- ☐ Very familiar and have regular contact with the EAP.
- ☐ Familiar with one or more specific services but not familiar with the EAP as a whole.
- ☐ Unfamiliar and have little contact with the EAP or knowledge of its services.

Relationship to the organization undergoing study (check only one):

☐ Customer Organization ☐ Subcontractor ☐ Funding Source
☐ Referral Source (receive clients) ☐ Regulatory Body ☐ Other (please specify) _____

(SD = Strongly Disagree, D = Disagree, N = Neutral, A = Agree, SA = Strongly Agree, N/A = Not Applicable)

	SD	D	N	A	SA	N/A
1. The EAP's contractual agreements are clear and concise.	☐	☐	☐	☐	☐	☐
2. The EAP's contractual agreements have established timelines for service delivery.	☐	☐	☐	☐	☐	☐
3. The EAP has established procedures for evaluating contracted services.	☐	☐	☐	☐	☐	☐
4. The EAP provides periodic reports (at least quarterly) to customer or host organizations, including trends and recommendations regarding EAP service, according to the contractual agreement.	☐	☐	☐	☐	☐	☐
5. The EAP provides a year-end summary report to customer or host organizations according to the contractual agreement.	☐	☐	☐	☐	☐	☐
6. The EAP provides opportunities to the customer or host organization for feedback regarding satisfaction with the EAP and the service contract.	☐	☐	☐	☐	☐	☐
7. Information about the EAP's services and eligibility criteria is made available to employees and management of customer or host organizations.	☐	☐	☐	☐	☐	☐
8. The EAP does not discriminate in the provision of its services.	☐	☐	☐	☐	☐	☐
9. The EAP provides culturally sensitive services.	☐	☐	☐	☐	☐	☐
10. The EAP respects the confidentiality of the persons it serves.	☐	☐	☐	☐	☐	☐
11. The EAP acts in an ethical manner.	☐	☐	☐	☐	☐	☐
12. The EAP conducts informational, advisory, or educational programs to inform employees of its services.	☐	☐	☐	☐	☐	☐
13. The EAP is prompt in its communications.	☐	☐	☐	☐	☐	☐
14. EAP fees are reasonably priced.	☐	☐	☐	☐	☐	☐
15. The EAP is fiscally responsible.	☐	☐	☐	☐	☐	☐
16. EAP personnel act in a professional manner in their job performance.	☐	☐	☐	☐	☐	☐
17. The EAP complies with applicable laws and regulations.	☐	☐	☐	☐	☐	☐

☐ I would like to speak with the peer review team at the time of the accreditation site visit.
Name: _____
Daytime Phone: _____
Best time to call: _____

Additional comments that you wish to call to the attention of the COA peer review team.

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APPENDIX G:

Client Questionnaire and Associated Materials

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Survey of Your Opinions Concerning:

EAP: _____

TO: Clients of the EAP

FROM: The Council on Accreditation for Children and Family Services
120 Wall Street, 11th Floor
New York, NY 10005

The Council on Accreditation (COA) is conducting an accreditation study of the above EAP and seeks your assistance. The Employee Assistance Society of North America (EASNA) and COA have partnered to develop best practice standards for the EAP field. COA is a national organization, which sets standards for quality service and sends teams of experienced professionals to visit organizations to see whether they meet these standards.

Since you are currently using this EAP's services, it would be very helpful for COA to know what you think about the services that you receive from the EAP. Please take a few minutes to answer this short questionnaire and mail it to COA in the stamped, addressed envelope you have been given.

The survey will not contain your name, and the information you provide will be kept confidential.

Thank you for your help.

6236629835

Client Questionnaire

Please Return to: COA, 120 Wall Street, 11th Fl., New York, NY 10005, Fax 212-797-1428

Date:_____

EAP Name:

City:

State/ Province:

Your Age:

Number in your household (include yourself)

Gender: ○ Male ○ Female

When did you first use the services of the EAP? Month / Day / Year

	Strongly Disagree		Neutral		Strongly Agree	N/A
1. The EAP gave me written information about my rights and responsibilities as a client.	1 ○	○	○	○	○	○
2. The people who work at the EAP treat me with respect.	2 ○	○	○	○	○	○
3. Information about me or the services I receive cannot be shared with other persons or other organizations without my written permission.	3 ○	○	○	○	○	○
4. I know what to do if I have a complaint or problem with my counselor or someone else at the EAP.	4 ○	○	○	○	○	○
5. The EAP asks me how I think it could improve its services.	5 ○	○	○	○	○	○
6. The EAP is easy for me to get to.	6 ○	○	○	○	○	○
7. The hours of service are convenient for me.	7 ○	○	○	○	○	○
8. The building and offices are always clean.	8 ○	○	○	○	○	○
9. The building and offices are always safe.	9 ○	○	○	○	○	○
10. I did not have to wait to receive services.	10 ○	○	○	○	○	○
11. I have to pay for the services I receive from an outside referral organization.	11 ○	○	○	○	○	○
12. The fees I pay are fair/reasonable.	12 ○	○	○	○	○	○
13. I help plan my services and set my goals.	13 ○	○	○	○	○	○
14. The services I receive meet my needs.	14 ○	○	○	○	○	○
15. The EAP has helped me.	15 ○	○	○	○	○	○
16. I would recommend the EAP services to coworkers.	16 ○	○	○	○	○	○
17. I would use the EAP services again in the future if I needed to.	17 ○	○	○	○	○	○

Please use the space provided below to make any additional comments about the organization and the services it delivers.

☐ I would like to speak with the peer review team at the time of the COA accreditation site visit.

Name_____

Daytime Phone:_____ Best time to call: _____

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APPENDIX H:

List of Personnel

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1476583330

List of Personnel

Instructions: *Complete the following chart. Include all personnel not listed in the Service Summaries, including the CEO and other senior management, middle management, and all support staff not assigned to a specific service. (Make additional copies as necessary.)*

Name	Job Category/Title	Personnel Type	FTE (1.0, .25)	Degree/License Held (use abbreviations)	No. of years in position
		○ Employee ○ Affiliate			
		○ Employee ○ Affiliate			
		○ Employee ○ Affiliate			
		○ Employee ○ Affiliate			
		○ Employee ○ Affiliate			
		○ Employee ○ Affiliate			
		○ Employee ○ Affiliate			
		○ Employee ○ Affiliate			
		○ Employee ○ Affiliate			

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APPENDIX I:

Aggregate Job Category Form

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5086019436

Aggregate Job Category Form

I. Administrative/Management Job Categories

Instructions: *Complete the following chart for all administrative or management (non-service) job categories, including professional, and support positions. If the EAP has more than 10 administrative job categories, please copy this form, providing totals for all pages on the final page.*

Job Category/Title	No. Budgeted Position		No. Positions filled		Turnover Rate* (enter percentages below)	**Racial/Ethnic Composition Enter Percentages							
	F/T	P/T	F/T	P/T	Enter last two digits of year for past two years. ___ ___ ___ ___	American Indian/ Native Alaskan	Asian	Pacific Islander	African-American, Black	Hispanic, Latino	White	Multi-Ethnic, Multi-Racial	Race/ Ethnicity (not listed)
Total													

*Turnover Rate: $\frac{\text{Total number of persons leaving positions (all exits)}}{\text{Total number of occupied positions per category}} \times 100 =$ ___ % (Enter percentages above.)

** COA recognizes that several race or ethnic identities do not appear on this form. For research purposes only, COA has aggregated existing categories using information from the United States Census as a guide.

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APPENDIX J:

Personnel Questionnaire and Associated Material

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Memorandum

TO: Employees of _____
EAP Name

FROM: The Council on Accreditation
120 Wall Street, 11th Floor
New York, NY 10005
212-797-3000

RE: Personnel Questionnaire

The EAP you work with is undergoing an accreditation study by COA.

COA is seeking information from employees of this EAP. Information that you provide is valuable to gain an understanding of the EAP and to determine if it complies with EAP standards.

Please complete the attached Personnel Questionnaire as completely as you can. **When completing the form it is important that you write the EAP's full name and the name of the program where you work.** Do not fill in your name unless you want to be contacted by the review team.

The information you provide is confidential and will be seen only by members of the team that will review your EAP.

Your EAP will have provided you with an envelope addressed to COA; please return this form as quickly as possible.

Thank you.

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Personnel Questionnaire

Please Return To: COA, 120 Wall St., 11th Fl., New York, NY 10005, Fax 212-797-1428

EAP Name: _____

Program Name: _____

City: _____ State/Province _____

Your Name (optional): _____ Title: _____

Are You: (check all that apply)

○ Full-Time ○ Part-Time ○ Employee ○ Affiliate ○ Subcontractor ○ Other

		Strongly Disagree		Neutral		Strongly Agree
1. I have an up-to-date copy of or access to the EAP's personnel handbook.	1	○	○	○	○	○
2. Performance expectations are made clear to me.	2	○	○	○	○	○
3. I am aware of the EAP's harassment policy.	3	○	○	○	○	○
4. I am aware of the EAP's policy prohibiting discrimination.	4	○	○	○	○	○
5. I am aware of the EAP's grievance procedures and know how to make a complaint.	5	○	○	○	○	○
6. I receive an annual performance evaluation.	6	○	○	○	○	○
7. I receive regular supervision.	7	○	○	○	○	○
8. I get information from the outcomes measurement program and other quality improvement activities to use when working with my clients.	8	○	○	○	○	○
9. I received orientation or orientation materials within the first ninety (90) days of work with the EAP.	9	○	○	○	○	○
10. I received the training needed to help me successfully do my job.	10	○	○	○	○	○
11. I have been trained on how to assess and address safety issues in the workplace.	11	○	○	○	○	○
12. I received training on confidentiality.	12	○	○	○	○	○
13. Procedures regarding access to client records are enforced.	13	○	○	○	○	○
14. I am aware of the EAP's policy that addresses ethical treatment of clients.	14	○	○	○	○	○

Additional comments that you wish to call to the attention of the COA peer review team.

☐ I would like to speak with a member of the COA peer review team at the time of the site visit.

Name _____

Daytime Phone_____ Best Time to Call _____

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APPENDIX K:

NA Request Form

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Not Applicable "NA" Request Form

INSTRUCTIONS: Please complete and submit to COA for approval. Place a copy of the approved form in the order that documentation for the exempted standard would appear in the EAP's self-study document.

EAP	
City/State	
Phone/Fax/E-mail	
Date of Request	
Contact Person for NA Request	

Standard	**Reason for NA Request** **(The EAP must provide a reason for each request.)**

COA Decision

Date_____

❑ **The following standard(s) is/are not-applicable to the EAP pending approval by Peer Review Team.**

_____

❑ **The following standard(s) is/are applicable to the EAP.**

_____

Please mail or fax the completed form to: COA, 120 Wall Street, 11th Floor, New York, NY 10005, fax: 212-797-1428

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ADMINISTRATION AND MANAGEMENT
Sections 1-9

1. LEGAL COMPLIANCE*

1-1. The EAP complies with all applicable federal and state or provincial, and local laws and regulations.

Evidence of Compliance
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 (CEO) or a senior management representative.

1-2. EAPs that operate in foreign countries comply with the relevant statutory, regulatory, and administrative requirements of their respective locations of operation.

Interpretation: *This standard applies to multinational corporations that serve employees overseas, as well as EAPs that are incorporated in a foreign country.*

Evidence of Compliance	
ON-SITE The team will interview the CEO or a senior management representative.	
NA	The EAP is based in the United States.

1-3. The EAP's licenses, business registrations, tax returns, and other documentation of its lawful operation are valid and in good standing.

Evidence of Compliance
ON-SITE The team will review relevant documents and interview the CEO or a senior management representative.

1-4. 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
PRE-SITE Provide a description of any pending corrective actions, as applicable. ON-SITE The team will interview the CEO or a senior management representative.

1-5. **The EAP complies with all self-reporting requirements associated with licensure, accreditation, and/or other appropriate external review bodies in a timely manner.**

Evidence of Compliance
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.

1-6. **The EAP defines itself in its policy and promotional materials as either an internal, external, or combined EAP.**

Evidence of Compliance
PRE-SITE
Provide a sample of policy and promotional materials.

1-7. **The internal EAP has a plan that establishes it as a distinct service within the host organization.**

Evidence of Compliance	
PRE-SITE	
Provide the plan.	
NA	The EAP is external.

2. LEGAL STRUCTURE

2-1. **The external EAP or 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 corporation, 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 that has a duly promulgated charter, constitution, and/or bylaws with its own board of directors.

Evidence of Compliance
PRE-SITE
Provide documents of incorporation, partnership, or association or other documents authorizing the EAP or host organization to operate.

2-2. **The bylaws, constitution, or similar written document of the publicly traded and/or not-for-profit EAP are reviewed every four years and establish:**

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 PRE-SITE Provide the appropriate sections of the constitution, bylaws, or other legally effective documents regarding the structure and functions of the board of directors.	
NA	The EAP is a privately held for-profit corporation.

2-3. **The documents listed in 2-2 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 PRE-SITE Provide the appropriate section of the constitution, bylaws, or other documents regarding the structure of the board of directors.	
NA	The EAP is a privately held for-profit corporation.

2-4. **All members of the EAP's board of directors:**

a. receive an orientation to the board of directors and to the responsibilities of membership;
b. receive a manual with current, relevant organizational material that specifies their fiduciary and other responsibilities to the organization;
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: *"Relevant organizational materials" noted in (b) include but are not limited to bylaws, mission statement, and relevant policies and procedures.*

Evidence of Compliance 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 board of directors members.	
NA	The EAP is a privately held for-profit corporation.

2-5. **The privately held for-profit EAP has a legally effective document, such as a partnership agreement, articles of incorporation, or bylaws, that sets forth its structure, size, purpose, and manner of conducting business.**

Evidence of Compliance PRE-SITE Provide the appropriate sections of the partnership agreement, bylaws, or other documents regarding the structure of the senior management.	
NA	The EAP is not a privately held for-profit organization.

2-6. **The EAP reviews its mission statement and organizational goals at least every three years and makes revisions as necessary.**

Evidence of Compliance PRE-SITE Provide the statement of purpose, goals, articles of incorporation, or bylaws. ON-SITE The team will interview the CEO or a senior management representative.

3. OWNERS/SENIOR MANAGEMENT OR BOARD OF DIRECTORS RESPONSIBILITIES

3-1. **The owners/senior management or board of directors assumes the following responsibilities:**
a. setting the EAP's long term direction; and
b. participating in the EAP's planning and quality improvement processes.

Evidence of Compliance 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.	
NA	The EAP is internal.

3-2. **The EAP maintains a comprehensive policies and procedures manual that includes owners/senior management or board of directors-approved policy statements.**

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

Evidence of Compliance ON-SITE The team will review the policies and procedures manual.

3-3. **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 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's management of the EAP's fiscal affairs.

Interpretation: *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
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.
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.

3-4. **The chief executive officer provides written, comprehensive reports to the owners/senior management or board of directors according to a mutually agreed upon schedule regarding:**

a. present financial status and anticipated problems, as required by EAP policy;
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: *Such reports must be provided at least annually. Reports must be responsive to the owners'/senior management's or 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
ON-SITE
The team will interview the owners/CEO or representatives of the board of directors and review the most recent reports.

4. EAP POLICIES*

4-1. The chief executive officer or his/her designee reviews written policies and procedures annually for their continued applicability.

Evidence of Compliance
ON-SITE
The team will interview the CEO or a senior management representative.

4-2. The EAP follows a policy which states that client files are the property of the EAP program or the external customer organization or the host organization.

Evidence of Compliance
PRE-SITE
Provide the required policy.

4-3. The EAP follows a policy that states 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	
PRE-SITE	
Provide the required policy.	
NA	The EAP is internal.

4-4. EAP policy sets forth its relationship with:

a. managed behavioral healthcare companies which provide services to the host organization, if an internal EAP; or

b. any customer organizations if an external EAP.

Evidence of Compliance	
PRE-SITE	
Provide the required policy.	
NA	The EAP customer organization does not have any relationships with managed behavioral healthcare companies.

4-5. The EAP follows a policy which states 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 not able to continue service.

(continued on next page)

Evidence of Compliance
PRE-SITE
Provide the required policy.

4-6. **The EAP follows a policy which states that employee assistance services are available to EAP staff members.**

Evidence of Compliance
PRE-SITE
Provide the required policy.

4-7. **The EAP's policies, procedures, and practices prohibit discrimination in service delivery.**

Interpretation: *The nondiscrimination policy may be a policy that applies to other divisions of the host or customer organization.*

Evidence of Compliance
PRE-SITE
Provide policies and procedures related to non-discrimination.
ON-SITE
The team will interview staff members and clients when permissible.

5. PROGRAM DESCRIPTION*

5-1. **The EAP has a written program description that includes:**
a. an explanation of the kind of services offered by the EAP;
b. the location of the EAP services; and
c. ways to access EAP services.

Evidence of Compliance
PRE-SITE
Provide the written program description.

5-2. **The program description also includes a clear description of the:**
a. kinds of referrals the EAP accepts and the referral process to the EAP;
b. availability of emergency services; and
c. nature and extent of preventive and health promotion activities to be undertaken through the EAP.

Evidence of Compliance
PRE-SITE
Provide the written program description.

5-3. **The program description also includes:**

a. a statement verifying that the EAP adheres to all legal requirements; and

b. a statement maintaining the EAP's neutrality with the host or customer organization with respect to employee/employer relations.

Evidence of Compliance
PRE-SITE
Provide the written program description.

5-4. **Each service proposal, contract, or report to the host or customer organization clearly specifies:**

a. the definition of a "case" (e.g., one person, each member of the family, or a 20 minute telephone session);

b. the definition of a "new" client;

c. the definition of "utilization," as addressed in the glossary; and

d. amount (e.g., number of hours) of clinical and account management time projected per defined period.

Evidence of Compliance
PRE-SITE
Provide the documents described in the standard and/or other material that includes the required definitions.
ON-SITE
The team will examine a sample of contracts.

6. PERSONNEL PRACTICES**

6-1. **The EAP maintains an organizational chart that specifies all staff member and affiliate positions in the EAP and if applicable, the position of the EAP within the host organization.**

Evidence of Compliance
PRE-SITE
Provide a copy of the organizational chart.

6-2. **Personnel policies and procedures are outlined in a manual, handbook, or other document that is provided to all EAP staff which covers:**

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; and

e. insurance protections.

Evidence of Compliance
ON-SITE
The team will review the personnel policies and procedures manual, and interview personnel.

6-3. **The 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
ON-SITE
The team will review the personnel policies and procedures manual, and interview personnel.

6-4. **The EAP requires staff members to initial a statement indicating that they have received and understand the policies and procedures contained in the manual.**

Evidence of Compliance
ON-SITE
The team will review completed statements and interview personnel.

6-5. **The EAP maintains an individual personnel record on each staff member/affiliate that includes:**

a. job descriptions;
b. employee contracts or letters of hire;
c. resumes;
d. copies of current licenses;
e. malpractice insurance coverage;
e. signed confidentiality statements; and
f. other appropriate documents.

Evidence of Compliance
ON-SITE
The team will review a sample of staff and affiliate records.

6-6. **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
ON-SITE
The team will interview personnel and review the EAP's collective bargaining agreement, if applicable.

6-7. **Performance reviews are conducted at least annually between each staff member and his/her supervisor.**

Interpretation: *Performance reviews are conducted in person. The standard also requires that affiliates are evaluated annually.*

(continued on next page)

Evidence of Compliance
PRE-SITE
Provide personnel evaluation and review procedures.
ON-SITE
The team will review personnel records and interview personnel.

6-8. The EAP follows a personnel procedure that addresses expectations for staff and affiliates conduct and performance.

Evidence of Compliance
PRE-SITE
Provide the required procedure.
ON-SITE
The team will interview the CEO or a senior management representative and supervisors.

6-9. The EAP follows procedures that address the use of virtual staff members or affiliates and the appropriate environments used for such staff.

Evidence of Compliance	
PRE-SITE	
Provide the required policy.	
ON-SITE	
The team will interview virtual staff.	
NA	The EAP does not use virtual staff members.

7. HUMAN RESOURCE POLICIES*

7-1. The EAP's personnel policies and procedures state that it will not unlawfully discriminate against any person or categories of persons protected by applicable federal and state or provincial, and/or local laws.

Evidence of Compliance
PRE-SITE
Provide sections or pages of the personnel manual that relate to the requirements of this standard.
ON-SITE
The team will review staff grievances.

7-2. The EAP complies with applicable laws and regulations governing fair employment practices and contractual relationships.

Interpretation: *This standard applies to the EAP's employment practices and contracts, including its use of independent contractors, volunteers, 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 origin.* *(continued on next page)*

Evidence of Compliance
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 review relevant minutes of meetings in which these matters were discussed.

7-3. The EAP follows a written equal employment opportunity or employment equity policy that:
- **a. clearly states its practices for recruitment, employment, transfer, and promotion of personnel;**
- **b. is appropriately disseminated, with written acknowledgement of receipt required; and**
- **c. is used in recruitment processes.**

Evidence of Compliance
PRE-SITE
Provide the EAP's policy on equal employment opportunity or employment equity.
ON-SITE
The team will review copies of recruitment materials, such as posters or statements inserted in advertisements, brochures, etc., regarding the non-discriminatory nature of the EAP's personnel practices.

7-4. The EAP actively recruits persons who are ethnically/culturally representative of the client population.

Evidence of Compliance
PRE-SITE
Provide recruitment procedures or promotional materials.
ON-SITE
The team will interview counselors.

7-5. As applicable, the EAP protects against financial risk by carefully reviewing its retention of independent contractors, volunteers, and temporary employees with respect to exposure to tax law, wage and hour laws, and other applicable employment and labor laws, and conforms to legal requirements.

Evidence of Compliance
PRE-SITE
Provide written material regarding the EAP's use of independent contractors, temporary employees, and volunteers, including conformity with legal requirements.
ON-SITE
The team will interview management personnel.

7-6. The EAP follows policies and procedures that address staff complaints, grievances, and appeals by:
- **a. outlining 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.**

(continued on next page)

Evidence of Compliance
PRE-SITE
Provide staff grievance policies and procedures.
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.

7-7. The EAP's policies on harassment include:

a. a statement that the EAP will have zero tolerance for prohibited harassment;
b. a clear definition of the kinds of behavior the EAP recognizes as 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: *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 policy.*

Evidence of Compliance
PRE-SITE
Provide harassment policies.
ON-SITE
The team will interview personnel and clients, and review harassment reports.

7-8. The EAP based in the United States follows a policy that addresses its role with host or customer organizations that require drug testing of corporate staff members.

Evidence of Compliance	
PRE-SITE	
Provide the required policy.	
NA	The EAP is not based in the United States.

8. RECRUITMENT AND SELECTION OF PERSONNEL

8-1. The EAP maintains a detailed job description or description of responsibilities for all categories of employees, affiliates, or other contractors.

Evidence of Compliance
PRE-SITE
Provide a sample of job descriptions for EAP staff at all levels.
ON-SITE
The team will select and review a sample of job descriptions.

8-2. **The EAP follows screening procedures for new and existing staff members and affiliates, in conjunction with human resource administrators or legal counsel, that require, unless contravened by law:**

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

Interpretation: *This standard applies to all program 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
PRE-SITE
Provide screening procedures.
ON-SITE
The team will review personnel records.

8-3. **The EAP verifies the credentials of all staff members and affiliates 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: *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.*

Evidence of Compliance
PRE-SITE
Provide procedures for verifying credentials.
ON-SITE
The team will interview human resources personnel and will review personnel and affiliate records.

9. HUMAN RESOURCE EVALUATION

9-1. **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.

(continued on next page)

Evidence of Compliance
PRE-SITE
Provide evidence that a review has occurred within the last two years and that the requirements of the standard have been addressed. This may take the form of a description of the EAP's process or summaries of administrative meetings, a revised personnel plan, or dated revised job descriptions.
ON-SITE
The team will interview human resources personnel.

9-2. **In determining and reviewing the size of staff member workloads, management and/or supervisory personnel regularly assess:**

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.

Interpretation: *This regular assessment includes quality improvement process recommendations.*

Evidence of Compliance
PRE-SITE
Provide procedures for evaluating and assigning workload and job responsibilities.
ON-SITE
The team will interview human resources personnel.

9-3. **Every two years, the EAP analyzes and compares its current employment patterns with the following:**

a. the availability of persons with required qualifications in the area's work force;
b. the demographic composition of the EAP's client population;
c. the need to make required changes such as re-assignments and transfers; and
d. the need for culturally responsive and competent practitioners.

Interpretation: *Since effective compliance with equal opportunity laws depends more upon the voluntary efforts of employers than it does the use of compliance mechanisms, COA expects the EAP to make a reasonable effort to assess its own hiring practices, and, if there is evidence of past or present discrimination (such as a statistical disparity), to make plans or take steps to rectify this.*

Evidence of Compliance
PRE-SITE
The team will review the Job Category Form, a copy of the most recent analysis done on organization employment patterns, and use of available, qualified persons in the area workforce.
ON-SITE
The team will interview the CEO or a senior management representative or designee assigned to analyze employment patterns.

HEALTH AND SAFETY
Sections 10-11

10. QUALITY OF THE SERVICE ENVIRONMENT

10-1. The EAP and its affiliates comply with federal and state or provincial, and local legal requirements governing public accessibility, health, and safety.

Interpretation: *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
ON-SITE
The team will observe the facility, review certificates of occupancy, licenses, or similar documents, and interview management personnel.

10-2. The EAP maintains a service environment in all primary and affiliate offices that is:
- **a. safe;**
- **b. clean;**
- **c. free of fire hazards;**
- **d. smoke free;**
- **e. child friendly; and**
- **f. professional.**

Evidence of Compliance
ON-SITE
The team will tour and observe facilities, offices, and equipment.

10-3. The EAP has sufficient office space to ensure client and counselor confidentiality.

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

Evidence of Compliance
ON-SITE
The team will tour and observe facilities and offices.

10-4. In planning the location of its offices and branches, the EAP addresses:
- **a. 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: *This standard requires the EAP to address the needs of persons with disabilities.*

(continued on next page)

Evidence of Compliance
PRE-SITE
The team will review information addressing the accessibility of the EAP's offices.
ON-SITE
The team will observe facilities.

10-5. **An EAP corporate office or site that serves 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 needed assisted technology.

Interpretation: *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. For example, if the EAP serves an individual with linguistic impediments, such as one who is mute, the EAP should provide communication assistance, such as a computer or an individual fluent in sign language, to facilitate service.*

Evidence of Compliance
ON-SITE
The team will interview personnel and observe the facility for adaptations to meet special needs.

10-6. **The EAP has sufficient handicap-accessible affiliate offices and ensures that each corporate office or site is handicap-accessible.**

Evidence of Compliance
ON-SITE
The team will interview senior management personnel.

11. OFFICE SAFETY AND SECURITY**

11-1. **The EAP establishes policies that address workplace violence and include procedures for responding to emergency situations within the workplace and training staff in these areas.**

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

Evidence of Compliance
PRE-SITE
Provide policy and procedures addressing workplace violence.
ON-SITE
The team will interview management personnel.

11-2. **EAP and affiliate facilities and offices:**

a. are equipped with security devices, including an immediate security linkage in spaces where clients are seen face-to-face; and

b. follow procedures for protecting staff during higher-risk late evening hours.

Interpretation: *Possible ways to address the standard include the use of dead-bolt doors, panic alarms, entrance bells, and congregate working areas to improve safety.*

Evidence of Compliance
PRE-SITE
Provide security procedures for late evening hours.
ON-SITE
The team will interview staff and inspect security devices.

11-3. **The EAP has procedures to ensure that all buildings, grounds, and facilities are safe and secure for clients and personnel 24 hours a day.**

Interpretation: *Such procedures may include measures against vandalism and bars on windows.*

Evidence of compliance
PRE-SITE
Provide security procedures.
ON-SITE
The team will review incident reports and interview personnel and clients when permissible.

11-4. **The EAP protects against fire emergencies by:**

a. posting a fire emergency plan at each EAP or affiliate office;

b. conducting annual fire drills at all EAP corporate offices; and

c. conducting annual fire inspection reports at each office location and making such reports available to staff and clients.

Evidence of Compliance
PRE-SITE
Provide fire drill procedures, inspection reports, and the fire emergency plan.
ON-SITE
The team will interview personnel.

11-5. **The EAP follows procedures that require all visitors to present identification and sign in at EAP offices and affiliate offices.**

Evidence of Compliance
PRE-SITE
Provide the required procedures.

FINANCE
Sections 12-15

12. FINANCIAL INFORMATION**

12-1. The EAP is in sound financial condition and has not filed for or been petitioned into bankruptcy.

Evidence of Compliance
ON-SITE
The team will interview the chief financial officer or equivalent.

12-2. The EAP has a written budget that serves as a plan for managing its financial resources for the fiscal year and enables it to provide services.

Evidence of Compliance
PRE-SITE
Provide the EAP's budget and budget planning procedures.
ON-SITE
The team will review minutes from financial committee meetings and interview management and fiscal personnel as necessary.

12-3. The EAP's working budget includes provisions for staff training, performing evaluation activities, administrative overhead, travel if appropriate, and at least two months' staff salaries.

Evidence of Compliance
PRE-SITE
Provide the EAP's budget and budget planning procedures.
ON-SITE
The team will interview administrative and accounting staff.

12-4. External EAPs have sufficient financial resources, i.e., cash and/or credit line, to cover operational expenses for the next 12 months.

Interpretation: *This includes specific state or provincial requirements.*

Evidence of Compliance	
PRE-SITE	
Provide the EAP's budget and budget planning procedures.	
ON-SITE	
The team will interview administrative and accounting staff.	
NA	The EAP is internal.

12-5. **The EAP routinely analyzes information on service revenues and actual service delivery costs per employee served on a per capita basis.**

Interpretation: *The analysis can be done independently or with another entity.*

Evidence of Compliance
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.

12-6. **The EAP bills its customers on a per capita basis and provides its customer organizations with a copy of its billing procedures.**

Interpretation: *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 EAP;*
- *cost per hour for counseling or cost per employee, 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 on-line services; and*
- *costs related to subcontracts.*

Evidence of Compliance	
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. ON-SITE The team will interview management staff.	
NA	The EAP is internal.

12-7. **Oversight and management of the EAP's accounting system requires that:**

a. a fiscal officer or business manager who is given responsibility for maintaining the accounting system has prior accounting experience, an accounting degree, M.B.A. degree, or C.P.A. credential, as appropriate to the size and complexity of the EAP;

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
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.

13. FINANCIAL STATEMENTS**

13-1. The EAP maintains an accounting manual that addresses the timely payment of accounts payables and collection of accounts receivables.

Evidence of Compliance
ON-SITE
The team will review the accounting manual and interview the chief financial officer or equivalent, if necessary.

13-2. The EAP's annual financial statements are prepared in accordance with Generally Accepted Accounting Principles.

Evidence of Compliance
ON-SITE
The team will review financial statements, the accounting manual, and interview the CEO, a senior management representative, or financial personnel.

13-3. 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: *Compliance with this section 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.*

Evidence of Compliance
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 the CEO, a senior management representative, or financial personnel.

13-4. 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: *Please note that these procedures must address cash, checks, and other accounts.*

Evidence of Compliance
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.

13-5. **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: *Subsidiary records include, but are not limited to: Accounts Receivable, Accounts Payable, and Property Plan & Equipment.*

Evidence of Compliance
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.

13-6. **As required by law, the EAP makes timely payments to, or provides proof of exemption from, the appropriate taxing authorities.**

Interpretation: *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
PRE-SITE
Provide internal accounting procedures that address the elements of the standard.
ON-SITE
The team will review proofs of payment or exemption.

14. FINANCIAL ACCOUNTABILITY*

14-1. **The EAP makes summary information regarding its financial status available for inspection by external reviewers.**

Evidence of Compliance
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.

14-2. **The EAP that annually reports more than $500,000 in revenues hires a certified public accountant to conduct an annual audit of its financial records or a review of financial statements.**

Evidence of Compliance	
ON-SITE	
The team will review the EAP's audit and management letter, if applicable.	
NA	The EAP does not have annual revenue greater that $500,000.

14-3. **In an EAP that annually reports more than $500,000 in revenues, the owners or board of directors:**

a. accepts the audit; and

b. ensures that management promptly acts on the recommendations of a management letter, if any.

Interpretation: *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 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, if applicable, were formally accepted and minutes reflecting that management will act on recommendations as applicable.	
NA	The EAP does not have annual revenue greater than $500,000.

14-4. **The EAP that annually reports $500,000 or less in revenues 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 governing body.

Evidence of Compliance PRE-SITE Provide a copy of the most recent review of financial statements and any accompanying management letter.	
NA	The EAP does not have annual revenue of $500,000 or less.

14-5. **In an organization that annually reports $500,000 or less 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 ON-SITE The team will interview the chairperson of the audit committee or other designated person and review minutes of the owners' or board of directors' meeting 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 annual revenue of $500,000 or less.

15. PAYROLL

15-1. 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
PRE-SITE
Provide payroll procedures.
ON-SITE
The team will interview the CEO, a senior management representative, or a designee who has been assigned responsibility for payroll records, and personnel management, as described.

15-2. The EAP's payroll practices comply with federal and either state or provincial wage and hour laws.

Evidence of Compliance
ON-SITE
The team will interview the chief financial officer or equivalent.

15-3. External EAPs ensure that the billing format for both capitated and fee-for-service EAPs protect the confidentiality of clients.

Evidence of Compliance	
PRE-SITE	
Provide confidentiality procedures related to billing.	
NA	The EAP is not external.

EAP LEGAL LIABILITY
Sections 16-19

16. GENERAL PRINCIPLES

16-1. The EAP utilizes legal counsel to clarify the meaning of laws or regulations governing any service or program it operates or to respond to other legal inquiries.

Evidence of Compliance
ON-SITE
The team will review letters of agreement or other evidence of arrangements for legal advice.

16-2. The EAP evaluates and 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
PRE-SITE
Provide relevant job descriptions for personnel, and procedures and other related material regarding liability.
ON-SITE
The team will interview the CEO or a senior management representative and designated personnel.

16-3. The EAP follows procedures regarding the appropriate handling of media inquiries that protect the confidentiality of clients and such procedures are communicated to all EAP senior managers or their designees.

Evidence of Compliance
PRE-SITE
Provide procedures regarding media relations.

16-4. The EAP consults with legal counsel regarding matters involving unusual disclosure of client information and associated risks.

Evidence of Compliance
PRE-SITE
Provide procedures addressing the disclosure of client information.
ON-SITE
The team will interview personnel.

17. LIABILITY INSURANCE**

17-1. The EAP provides insurance coverage for professional staff related to the scope of their activities performed on the EAP's behalf and:
a. provides written notification to professional staff on the amount and type of such coverage;
b. advises the professional 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.

(continued on next page)

Interpretation: *All employees 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
PRE-SITE
Provide a description of the insurance coverage that is provided for professional staff.
ON-SITE
The team will interview the human resource director or other human resources staff and employees, and review insurance policies, if necessary.

17-2. Contracts with affiliates or subcontractors require that affiliates carry professional liability insurance in the amount of $1 million/$3 million, or as required by state or provincial law, and a copy of the insurance policy is included in the affiliate's record.

Evidence of Compliance
ON-SITE
The team will inspect contracts and insurance policies in affiliate records.

17-3. All EAP staff members who sign checks, handle cash or contributions, or manage funds are bonded at the EAP's expense, or the EAP maintains appropriate insurance coverage to cover potential losses.

Evidence of Compliance
ON-SITE
The team will review insurance policies and/or documentation regarding bonding as per the standard.

17-4. An EAP that provides services by telephone or on-line, including services provided across state or provincial lines:
a. complies with applicable legal requirements; and
b. maintains malpractice and liability insurance that covers each on-line or telephone counselor.

Interpretation: *In the cases where an EAP counselor provides telephone services across state lines from a state that does not require professional licensure, to a client in a state that does require licensure, the EAP must comply with the licensure requirements of the state in which the client resides.*

Evidence of Compliance
PRE-SITE
Provide documentation or a narrative discussing this issue.
ON-SITE
The team will review the insurance policy and interview the program director.

18. RECORD-KEEPING PRACTICES AND PROCEDURES* _____

18-1. The EAP maintains an accurate and timely written or computer-based record for each client that is separate and distinct from any other record that is maintained for the client.

(continued on next page)

Evidence of Compliance
ON-SITE
The team will review a sample of computer or written records.

18-2. **The internal EAP follows a procedure which states that client record contents shall never be part of or stored with personnel folders, medical files, or other records that are maintained for the client.**

Evidence of Compliance	
PRE-SITE	
Provide relevant procedures.	
ON-SITE	
The team will interview the person in charge of maintaining client records.	
NA	The EAP is not internal.

18-3. **The EAP maintains client records in a manner consistent with applicable legal requirements and the EAP's confidentiality policy.**

Evidence of Compliance
PRE-SITE
Provide procedures for maintaining client records.
ON-SITE
The team will observe the EAP's system for maintaining client records and review client records.

18-4. **The EAP follows procedures that address the content, handling, and secure storage of hard copy and computerized client records and such procedures:**

a. protect client and customer organization privacy;
b. limit access to staff or affiliates who are specifically authorized to view records and who have signed confidentiality agreements;
c. require that records or other identifying client information are never left in open view or in unlocked cabinets or rooms; and
d. require that records removed from a central file location be signed out prior to removal from that area for record entry and/or review.

Evidence of Compliance
PRE-SITE
Provide relevant policies regarding client records.
ON-SITE
The team will observe the EAP's system for maintaining client records.

18-5. **The EAP follows procedures that govern the retention, maintenance, and destruction of records of former clients and include protocols on:**

a. legitimate requests by former clients for access to information, when permissible by law;
b. requests for records of deceased clients; and
c. disposition of records in the event of the EAP's dissolution.

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

(continued on next page)

Evidence of Compliance
PRE-SITE
Provide procedures that address the records of former clients.
ON-SITE
The team will observe the record-keeping system.

18-6. **After clients have ceased contact with the EAP, all staff and 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
PRE-SITE
Provide procedures that address the retention of client records.

19. AFFILIATE AGREEMENTS*

19-1. **Affiliate agreements are comprehensive and address the same performance standards required of EAP staff members.**

Evidence of Compliance
ON-SITE
The team will interview affiliates and review a sample of affiliate agreements.

19-2. **Affiliate agreements include, but are not limited to, terms and conditions on the following:**
- **a. accessibility for persons with disabilities;**
- **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.**

Evidence of Compliance
PRE-SITE
Provide contracting procedures that address the standard.
ON-SITE
The team will review a sample of agreements.

19-3. **Agreements with affiliates state that EAP client records are the property of the EAP rather than the affiliate or subcontractor.**

Evidence of Compliance
PRE-SITE
Provide contracting procedures that address the standard.
ON-SITE
The team will review a sample of agreements.

19-4. **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
PRE-SITE
Provide contracting procedures that address the standard.
ON-SITE
The team will review a sample of agreements.

19-5. **Affiliate agreements state that the affiliate is required to maintain records in a secure location to which only the affiliate or subcontractor has access.**

Evidence of Compliance
PRE-SITE
Provide contracting procedures that address the standard.
ON-SITE
The team will review a sample of agreements.

19-6. **Affiliate agreements contain the requirement that a minimum of five percent of the EAP's affiliates per year will be evaluated annually through an on-site or other type of quality improvement review.**

Interpretation: *Please see 32-2 for additional information on the annual site visit process for affiliates.*

Evidence of Compliance
PRE-SITE
Provide contracting procedures that address the standard.
ON-SITE
The team will review a sample of agreements.

19-7. **An EAP that uses affiliates and other independent contractors conforms to the requirements for retention of independent contractors set forth by Internal Revenue Service, Canada Customs and revenue Agency, or other appropriate government or international agency requirements.**

Evidence of Compliance
PRE-SITE
Provide a narrative statement that addresses the requirements of the standard.
ON-SITE
The team will interview the CEO, a senior management representative, or other appropriate staff.

CONTRACTS FOR EAP SERVICES
Sections 20-24

NA 20-24 The EAP is internal.

20. CONTRACTUAL AGREEMENTS*

20-1. The EAP includes written information about its service design and implementation in all bids and proposals to customer organizations.

Evidence of Compliance
ON-SITE
The team will review bids and proposals.

20-2. The EAP establishes and abides by formal contractual agreements that clearly describe, at a minimum:
a. the services to be provided;
b. financial terms;
c. mutual indemnification, when appropriate; and
d. mutual obligations of the EAP and customer organization.

Evidence of Compliance
PRE-SITE
Provide contracting procedures that address the standard.
ON-SITE
The team will review a sample of contracts.

20-3. Contractual agreements also specify:
a. quality improvement processes;
b. administrative and clinical record-keeping practices;
c. reporting procedures; and
d. evaluation methodologies.

Evidence of Compliance
PRE-SITE
Provide contracting procedures that address the standard.
ON-SITE
The team will review a sample of contracts.

20-4. The EAP contract describes the professional qualifications of its staff/affiliate members.

Evidence of Compliance
PRE-SITE
Provide contracting procedures that address the standard.
ON-SITE
The team will review a sample of contracts.

21. ACCOUNT MANAGEMENT

21-1. The EAP establishes written specifications for effective account management that include:
a. a designated account manager for each EAP contract; and
b. clear lines of responsibility for all aspects of each contract.

Evidence of Compliance
PRE-SITE
Provide account management procedures.
ON-SITE
The team will review a sample of contracts.

21-2. Account management specifications also include:
a. first year and ongoing plans for each contract by the respective account manager and client organization liaison; and
b. projected utilization rates.

Evidence of Compliance
PRE-SITE
Provide account management procedures.
ON-SITE
The team will review a sample of contracts.

21-3. All contract management activity is documented and reported according to a designated schedule to the customer organization.

Evidence of Compliance
PRE-SITE
Provide account management procedures.
ON-SITE
The team will review account records and reports.

21-4. EAP direct service staff members have immediate access to information on the benefits and utilization requirements of each contract.

Evidence of Compliance
PRE-SITE
Provide account management procedures.
ON-SITE
The team will interview intake and counseling staff.

21-5. The EAP maintains updated information on the customer's demographics, business, and covered EAP benefits.

Evidence of Compliance
PRE-SITE
Provide account management procedures.
ON-SITE
The team will interview contract managers.

22. PROGRAM PLANS

22-1. The EAP establishes a timeline for new accounts that outlines the steps required, time allocated, and responsibilities of the EAP and the customer organization for program implementation.

Evidence of Compliance
PRE-SITE
Provide procedures for setting up new accounts including developing timelines and provide three sample timelines.

22-2. The EAP establishes a program plan for each new account and the program plan articulates the roles and responsibilities of the chief executive officer, key management, union representatives, and staff members and affiliates.

Evidence of Compliance
PRE-SITE
Provide three program plans.

22-3. The program plan describes the premises, equipment, and staff resources required.

Evidence of Compliance
PRE-SITE
Provide three program plans.

22-4. The program plan includes promotional communications and employee communications that involve, 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
PRE-SITE
Provide three program plans highlighting the outlined activities.

22-5. **When the customer organization requests a needs analysis to facilitate program design, the EAP requests the following information:**

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
PRE-SITE
Provide samples of correspondence or needs assessments that meet the above requirements.
ON-SITE
The team will interview appropriate staff.

22-6. **When legally permissible and appropriate for the program location, and when the host or customer organization requests it, the EAP establishes a profile of the customer that describes the demographics of the work force and 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
PRE-SITE
Provide samples of customer profiles.

23. REPORTS TO CUSTOMER ORGANIZATIONS*

23-1. **A designated staff member is responsible for making designated periodic reports, including trends and recommendations regarding the EAP service, available to the appropriate department (e.g., human resources, medical) within the customer organization and/or the payer of EAP services.**

Evidence of Compliance
PRE-SITE
Provide one year of periodic reports for five contracts.
ON-SITE
The team will select and review a larger sample of reports.

23-2. **The periodic reports include protections to guard against breaches of confidentiality for data requested by program managers.**

Evidence of Compliance
PRE-SITE
Provide one year of periodic reports for five contracts.
ON-SITE
The team will select and review a larger sample of reports.

23-3. **The EAP reports to the customer organization, at least quarterly, or as indicated by the EAP, according to an agreed upon schedule on the demographic profile of clients served, and this profile includes:**

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
PRE-SITE
Provide four quarterly reports for five contracts.

23-4. **The EAP provides a year-end summary to each customer organization 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
PRE-SITE
Provide annual summaries for five contracts.

24. CONTRACT MANAGEMENT WITH CUSTOMER ORGANIZATIONS**

24-1. **The EAP consults with customer organizations at the beginning of the contract and annually thereafter to determine:**

a. how a case is defined and how utilization is calculated;
b. the desired outcomes and performance standards;
c. the means of measuring these outcomes; and
d. the format and frequency of reports.

Interpretation: *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
PRE-SITE
The team will review the Stakeholder Questionnaires.
ON-SITE
The team will interview contract managers and representatives of customer organizations and review a sample of contracts.

24-2. **The findings and recommendations of annual summaries and periodic reports developed for customer organizations influence the EAP's organizational and activity planning.**

Evidence of Compliance
ON-SITE
The team will interview the quality improvement director or equivalent.

24-3. **The EAP retains copies of periodic reports on file.**

Evidence of Compliance
PRE-SITE
Provide one year of periodic reports for five contracts.
ON-SITE
The team will select and review a larger sample of reports.

24-4. **The EAP conducts an annual face-to-face or telephone interview with customer human resources/health services/administrators or designees to determine their satisfaction with the EAP and the service contract.**

Evidence of Compliance
PRE-SITE
Provide the interview protocol used when interviewing customer human resources/health services/administrators.
ON-SITE
The team will interview the quality improvement director or equivalent and relevant customer organization administrators.

24-5. **The EAP generates utilization reports according to a designated schedule (at least quarterly or as indicated by the EAP) and such reports:**

a. analyze the profile of traffic using Domain Name System (DNS) lookup;
b. address variables such as cases opened, problem resolution rate, website usage, training/seminar participants, client telephone contacts, and supervisor telephone contacts, as applicable; and
c. are provided to the customer organization.

Evidence of Compliance
PRE-SITE
Provide the most recent utilization reports for five contracts.
ON-SITE
The team will interview the quality improvement director or equivalent.

QUALITY IMPROVEMENT
Sections 25-32

25. QUALITY IMPROVEMENT INFRASTRUCTURE*

25-1. The EAP follows a written plan for quality improvement and program evaluation that:
- **a. is based on program objectives, contract expectations, the previous year's results, and services provided through customer organizations;**
- **b. includes a written statement of goals and objectives for the coming year; and**
- **c. documents program evaluation methods that measure progress and results relative to these goals and objectives.**

Evidence of Compliance
PRE-SITE
Provide the quality improvement plan.
ON-SITE
The team will interview the CEO or a senior management representative, and the quality improvement director or equivalent.

25-2. 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.**

Evidence of Compliance
PRE-SITE
Provide collection mechanisms including client satisfaction questionnaires, organizational satisfaction questionnaires, employee surveys, training evaluations, incident reports, and documentation of satisfaction at follow-up of service, as appropriate.
ON-SITE
The team will interview the quality improvement director or equivalent.

25-3. The quality improvement document is annually updated and reviewed by senior management.

Evidence of Compliance
ON-SITE
The team will interview the CEO or a senior management representative, and the person with overall responsibility for the EAP's quality improvement efforts, and where applicable, review board of directors minutes that address review of the quality improvement document.

25-4. At least every four years, the EAP conducts organization-wide, long-term, strategic planning that:
- **a. clarifies the EAP's mission, values, and mandates;**
- **b. establishes goals and objectives that flow from its mission and mandated responsibilities;**
- **c. assesses its strengths and weaknesses;**
- **d. assesses human resource needs; and**
- **e. identifies and formulates strategies for meeting identified goals.**

(continued on next page)

Evidence of Compliance
PRE-SITE
Provide the current strategic plan; provide board of directors' minutes that address review of the strategic plan.
ON-SITE
The team will interview the CEO or a senior management representative, and where applicable, members of the board of directors.

25-5. The EAP identifies key problem areas from the strategic plan to facilitate the construction of an action plan for program implementation.

Evidence of Compliance
PRE-SITE
Provide five action plans.
ON-SITE
The team will interview the CEO or a senior management representative, and the person with overall responsibility for the EAP's quality improvement efforts.

26. INFORMATION MANAGEMENT**

26-1. The EAP maintains a tracking system to ensure that it can retrieve all client and other records in a timely fashion.

Evidence of Compliance
PRE-SITE
Provide a description of the record tracking system.
ON-SITE
The team will observe the tracking system.

26-2. The EAP regularly reconciles all closed client records, including hard copy and computerized records, for accuracy.

Evidence of Compliance
PRE-SITE
Provide record reconciliation procedures.
ON-SITE
The team will interview staff responsible for reconciling records.

26-3. EAP procedures protect service and other organizational records, whether in electronic or paper form, from destruction by fire, water, loss, or other damage, and from unauthorized access, including:

a. daily backup of all databases and electronic records;
b. onsite and offsite storage of the electronically backed up files; and
c. secure storage of hard copy records in areas that are fire protected by automatic detection and fire retardant systems.

(continued on next page)

Evidence of Compliance
PRE-SITE
Provide procedures for protecting client records as per the standard.
ON-SITE
The team will observe the record-keeping system, procedures, and safeguards.

26-4. The EAP maintains a written disaster recovery and back-up plan for its on-line and telephone services 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: *The EAP must maintain a back-up power supply for phones and MIS.*

Evidence of Compliance
PRE-SITE
Provide the disaster recovery plan.
ON-SITE
The team will observe the components of the plan.

26-5. The EAP protects electronically maintained client records by installing and maintaining up-to-date anti-virus protection on all computers and implementing procedures to protect the confidentiality and integrity of internal databases and/or other programs that contain sensitive information.

Evidence of Compliance
PRE-SITE
Provide procedures for protecting electronically maintained client records as per the standard.
ON-SITE
The team will observe the record-keeping system, procedures, and safeguards.

26-6. Electronic client records are maintained on a server that provides access to individual workstations, rather than residing on an individual unit.

Evidence of Compliance
ON-SITE
The team will observe the system for maintaining electronic client records.

27. EVALUATION OF PERFORMANCE**

27-1. The EAP has a management information system that is capable of supporting its operations, planning, and evaluation activities.

Evidence of Compliance
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 MIS efforts, and relevant personnel.

27-2 The EAP evaluates its systems, procedures, and outcomes on an ongoing basis and uses the results to continuously improve performance.

Interpretation: *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
PRE-SITE
Provide documentation that the required evaluation is occurring in each service offered, e.g. legal services, financial services, short-term counseling/short-term problem resolution, etc. Provide a description or other documentation of how results are used to improve performance.
ON-SITE
The team will interview the CEO or a senior management representative, and the quality improvement director or equivalent.

27-3. The EAP has systems that maintain data capture methods for the following types of information:

a. client identification;
b. demographic and work data;
c. the 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. outcome measurement for services sought by clients.

Evidence of Compliance
PRE-SITE
Provide data collection tools.

27-4. **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 service provided;
g. racial/ethnic composition, as appropriate to the service provided; and
h. how much the customer has paid per employee (for external programs only).

Evidence of Compliance	
PRE-SITE	
Provide a sample of five customer profiles.	
NA	The EAP is not in the United States.

28. INTERNAL QUALITY MONITORING**

28-1. **The EAP evaluates its progress toward achieving goals and objectives set forth in its quality improvement plan at least quarterly.**

Evidence of Compliance
ON-SITE
The team will interview the quality improvement director or equivalent.

28-2. **The EAP collects data and integrates findings into its overall quality improvement system on each service provided, which may include, but not be limited to:**

a. training to supervisors and union representatives;
b. work-life;
c. legal services;
d. critical incident stress management; and
e. short-term counseling/short-term problem resolution.

Evidence of Compliance
PRE-SITE
Provide procedures and data collection tools related to the standard.
ON-SITE
The team will interview the quality improvement director or equivalent.

28-3. **When an EAP uses branch offices to deliver EAP services, the EAP is responsible for ensuring that counselors remote from the main office adhere to the same standards and quality of care that is available at the primary service center.**

(continued on next page)

Evidence of Compliance
PRE-SITE
Provide procedures for monitoring, evaluating, and improving services provided in branch offices.
ON-SITE
The team will interview the CEO or a senior management representative and the quality improvement director or equivalent.

28-4. **The EAP conducts and 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 and affiliate cases per quarter, to evaluate:**

a. the quality of assessments;
b. the quality of short-term counseling/short-term problem resolution;
c. case or service planning;
d. services provided or obtained;
e. the results of service; and
f. aftercare planning.

Interpretation: *The quality review should be performed using a tool that specifies these and other indicators used.*

Evidence of Compliance
PRE-SITE
Provide file review procedures including data collection tools.
ON-SITE
The team will interview staff.

28-5. **The quarterly internal case reviews are:**

a. conducted so that counselors and supervisors do not review cases in which they have been directly involved; and
b. distinct from regular case review or service monitoring in which the direct service provider and supervisor participate.

Evidence of Compliance
PRE-SITE
Provide case review procedures.
ON-SITE
The team will interview staff.

28-6. **At least annually, the EAP reviews potential areas of liability and assess areas of overall risk to the organization, including:**

a. review of research involving program participants; and
c. review of compliance with legal requirements including licensing.

Evidence of Compliance
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 and other appropriate personnel.

28-7. **At least quarterly, the EAP conducts a review of all grievances or incidents involving clients, customer organizations, personnel, and affiliates including a review of environmental risks.**

Evidence of Compliance
PRE-SITE
Provide procedures for conducting quarterly reviews of grievances and incidents.

28-8. **The EAP collects and compiles incident/complaint data and makes this data available to the account managers and senior management or their designees.**

Interpretation: *Confidentiality must be protected during this process.*

Evidence of Compliance
PRE-SITE
Provide reports for the last two quarters.
ON-SITE
The team will interview account managers.

29. INDIVIDUAL OUTCOMES*

29-1. **The EAP evaluates:**

a. individual client satisfaction for all services received, whether assessment and referral, information and referral, short term counseling/short term problem resolution, CISM, legal, work-life, or other;
b. level of functioning; and
c. level of achievement for goal of assessed problem or request for service.

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

Evidence of Compliance
PRE-SITE
Provide outcome evaluation procedures.
ON-SITE
The team will interview the quality improvement director or equivalent.

29-2. **The EAP counselor gives a satisfaction questionnaire to each EAP client after the first session, and compiles and distributes the results quarterly or as indicated by the EAP, to the host or customer organization and the EAP's owners, board of directors, and/or senior management.**

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

Evidence of Compliance
PRE-SITE
Provide customer satisfaction procedures. The team will review Client Questionnaires.
ON-SITE
The team will interview the quality improvement director or equivalent, and clients when permissible.

29-3. **The EAP uses standardized measurement tools to evaluate individual improvements in client functioning at intake and at follow-up.**

Interpretation: *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
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.

29-4. **The EAP tracks and trends client self-reported outcomes and counselor reported outcomes in achieving the goal established at the first session.**

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

Evidence of Compliance
PRE-SITE
Provide data or other relevant documentation.
ON-SITE
The team will interview the quality improvement director or equivalent.

29-5. **After each episode of training or consultation, the EAP surveys the recipient of such services 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
PRE-SITE
Provide a sample evaluation sheet.

30. EXTERNAL AUDITS**

30-1. **The EAP and the customer organization mutually agree on the scope of the audit in advance, and the audit is restricted to this predetermined scope.**

Evidence of Compliance
PRE-SITE
Provide procedures or other documentation regarding third party audits.
ON-SITE
The team will interview the quality improvement director or equivalent.

30-2. **The EAP recognizes all customer organization requests for third-party audits as legitimate evaluation activities that foster service accountability, due diligence, and program development.**

Evidence of Compliance
PRE-SITE
Provide procedures or other documentation regarding third party audits.
ON-SITE
The team will interview the quality improvement director or equivalent.

30-3. **The audit firm and/or its designated auditor are independent of the customer organization and the EAP.**

Evidence Compliance
PRE-SITE
Provide procedures or other documentation regarding third party audits.
ON-SITE
The team will interview the quality improvement director or equivalent.

30-4. **Auditor access to EAP client records is limited to a range of records that is defined in writing and agreed to in advance.**

Evidence of Compliance
PRE-SITE
Provide procedures or other documentation regarding third party audits.
ON-SITE
The team will interview the quality improvement director or equivalent.

30-5. **The EAP conforms to required auditing procedures when it permits components of files or records to be copied or removed from auditing sites.**

Note: Under U.S. 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
PRE-SITE
Provide procedures or other documentation regarding third party audits.
ON-SITE
The team will interview the quality improvement director or equivalent.

30-6. **If a third party is used for ongoing program evaluation including program audit, the EAP incorporates a provision for the use of a third party into the EAP service contract.**

Evidence of Compliance	
PRE-SITE	
Provide procedures or other documentation regarding third party audits.	
ON-SITE	
The team will interview the quality improvement director or equivalent.	
NA	The EAP does not use a third party for program evaluations.

30-7. **The third-party audit firm signs non-disclosure and confidentiality agreements to protect the EAP's intellectual and proprietary property.**

Evidence of Compliance	
PRE-SITE Provide procedures or other documentation regarding third party audits. ON-SITE The team will interview the quality improvement director or equivalent, review signed agreements, and evidence of required insurance.	
NA	The EAP does not use a third-party for program evaluations.

30-8. **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
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.

31. QUALITY IMPROVEMENT WITH SUBCONTRACTORS AND REFERRAL RESOURCES

31-1. **An EAP that purchases legal services, training for supervisors, work-life, organizational development, or other services from subcontracting organizations has a system in place to monitor, evaluate, and improve each of those contracted services.**

Evidence of Compliance	
PRE-SITE Provide procedures for monitoring, evaluating, and improving purchased services. ON-SITE The team will interview the CEO or a senior management representative, and the quality improvement director or equivalent.	
NA	The EAP does not purchase the listed services from a subcontractor.

31-2. **The EAP evaluates referral resources on an on-going basis to assess safety, quality, and effectiveness of services provided.**

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

Evidence of Compliance
PRE-SITE Provide procedures for evaluating referral resources. ON-SITE The team will interview the CEO or a senior management representative, and the quality improvement director or equivalent.

31-3. **The EAP requires each subcontractor to keep records of all training/education s/he received and makes these available to the provider and/or external reviewers on request.**

(continued on next page)

Evidence of Compliance
PRE-SITE
Provide material describing the EAP's system for monitoring, evaluating, and improving purchased services.
ON-SITE
The team will interview the CEO or a senior management representative and the quality improvement director or equivalent.

31-4. The EAP holds all subcontractors accountable to the same quality and training requirements as those of the EAP.

Evidence of Compliance
PRE-SITE
Provide procedures for monitoring, evaluating, and improving purchased services.
ON-SITE
The team will interview the CEO or a senior management representative, and the quality improvement director or equivalent.

31-5. The EAP requires all subcontractors to collect and report demographic information on the EAP clients they serve.

Evidence of Compliance
PRE-SITE
Provide three samples of demographic information reports.

31-6. 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
PRE-SITE
Provide procedures for monitoring, evaluating, and improving services purchased from subcontractors.
ON-SITE
The team will interview the CEO or a senior management representative, and the quality improvement director or equivalent.

32. QUALITY IMPROVEMENT WITH AFFILIATES

32-1. An EAP that purchases some of its services from affiliates has a system in place to monitor, evaluate, and improve those contracted services.

Evidence of Compliance
PRE-SITE
Provide procedures for monitoring, evaluating, and improving services purchased from affiliates.
ON-SITE
The team will interview the CEO or a senior management representative, and the quality improvement director or equivalent.

32-2. **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 28-4);
b. safety of physical facilities;
c. possession of current licensure; and
d. compliance with EAP contract requirements.

Evidence of Compliance	
PRE-SITE Provide procedures for monitoring, evaluating, and improving services purchased from affiliates. ON-SITE The team will interview the CEO or a senior management representative, and the quality improvement director or equivalent.	
NA	The EAP does not use affiliates.

32-3. **The EAP holds all affiliates accountable to the same quality and training requirements as those of the EAP.**

Evidence of Compliance
PRE-SITE Provide procedures for monitoring, evaluating, and improving services purchased from affiliates. ON-SITE The team will interview the CEO or a senior management representative, and the quality improvement director or equivalent.

PERSONNEL AND AFFILIATE COMPETENCE
Sections 33-35

33. COMPETENCE OF COUNSELORS

33-1. EAP counselors have specialized training and demonstrated competence in all areas of EAP practice in which they are active.

Evidence of Compliance
PRE-SITE
Provide relevant job descriptions.
ON-SITE
The team will interview the personnel director and review personnel records.

33-2. The EAP has mechanisms to determine and document the qualifications and competence of counselors who work in the following areas:
a. family and relationship counseling;
b. child counseling;
c. alcoholism/drug/addiction counseling;
d. short-term counseling/short-tern problem resolution; and
e. critical incident stress management (CISM).

Evidence of Compliance
PRE-SITE
Provide procedures for verifying qualifications.
ON-SITE
The team will interview the personnel director and review personnel records.

33-3. All EAP counselors receive an initial orientation to the EAP within one month of beginning work with the EAP.

Evidence of Compliance
ON-SITE
The team will interview the personnel director and review personnel records.

33-4. All EAP counselors and their supervisors keep abreast of relevant regulatory and legislative developments.

Evidence of Compliance
PRE-SITE
Provide 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 the personnel director and staff.

34. CREDENTIAL REQUIREMENTS*

34-1. Assessment and referral, and short-term counseling/short-term problem resolution counselors have at least the following qualifications:

a. the terminal degree or available credential in a mental health profession, (terminal degrees include an MSW, an MS in nursing, or a Ph.D. in psychology);
b. appropriate state or provincial licensure, certification, or registration; and
c. training and experience in alcoholism/substance abuse treatment.

Interpretation: *This applies to face-to-face, telephone, and on-line services.*

Evidence of Compliance
PRE-SITE
Provide relevant job descriptions. The team will review the List of Personnel.
ON-SITE
The team will interview the personnel director and review personnel records.

34-2. Assessment and referral and short-term counseling/short-term problem resolution counselors have 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' EAP experience in a management or direct service role; or
f. a completed master's level internship in an EAP setting.

Evidence of Compliance
PRE-SITE
Provide relevant job descriptions. The team will review the List of Personnel.
ON-SITE
The team will interview the personnel director and review personnel records.

34-3. Information and referral staff and intake staff, have at least master's degrees in a mental health discipline and at least one year of clinical practicum in social work, psychology, or another mental health discipline.

Evidence of Compliance
PRE-SITE
Provide relevant job descriptions. **The team will review the List of Personnel.**
ON-SITE
The team will interview the personnel director and review personnel records.

34-4. 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
ON-SITE
The team will review a sample of affiliate contracts.

34-5. EAP counselors who are working towards practice requirements for licensure or certification meet supervision standards as prescribed by state, provincial, or professional licensure registration requirements.

(continued on next page)

Evidence of Compliance
ON-SITE
The team will interview the clinical director.

34-6. Telephone receptionists who do not handle clinical cases receive in-service training regarding the EAP's service delivery system.

Evidence of Compliance
PRE-SITE
Provide training curricula and attendance sheets.

35. ADDITIONAL CREDENTIAL REQUIREMENTS

35-1. All EAP interns are in training at the undergraduate or graduate level and are closely supervised by licensed or certified practitioners.

Evidence of Compliance
ON-SITE
The team will interview the fieldwork supervisor.

35-2. Supervisors are further qualified by additional training in supervision, and at least two years of supervised post-graduate experience in counseling.

Evidence of Compliance
PRE-SITE
Provide a list of supervisors and their qualifications, and job descriptions of supervisors.
ON-SITE
The team will interview the clinical director.

35-3. The EAP that provides informational, advisory, or educational services and programs (e.g., legal, work-life) confirms that direct service personnel employed or contracted to deliver these specialized services are experienced and possess relevant credentials.

Evidence of Compliance	
PRE-SITE	
Provide relevant job descriptions.	
ON-SITE	
The team will interview the personnel director and review personnel records.	
NA	The EAP does not provide the services described in the standard.

35-4. 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 resources management and/or an approved EAP training program.

Evidence of Compliance	
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.	
NA	The EAP does not provide management and human resource consultation.

35-5. **EAP counselors 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	
PRE-SITE Provide relevant job descriptions. ON-SITE The team will interview the personnel director and review personnel records.	
NA	The EAP does not provide Drug Free Workplace assessments.

35-6. **EAP counselors that provide on-line and/or telephone services possess equal qualifications (master's level) to those of other EAP counselors.**

Evidence of Compliance	
PRE-SITE Provide relevant job descriptions. The team will review the List of Personnel. ON-SITE The team will interview the personnel director and review personnel records.	
NA	The EAP does not provide on-line and/or telephone services.

35-7. **Work-life consultants possess:**

a. a minimum of a bachelor's degree;
b. specific expertise and training in the relevant field;
c. a minimum of 10 hours of training on appropriate intake and case management procedures; and
d. a minimum of two hours of individual or group supervision per month with a supervisor.

Evidence of Compliance	
PRE-SITE Provide relevant job descriptions. ON-SITE The team will review staff and affiliate records.	
NA	The EAP does not provide work-life services.

35-8. **Work-life supervisors possess:**

a. a master's degree in a related field; or
b. a bachelor's degree with a minimum of 7 years related experience.

Evidence of Compliance	
PRE-SITE Provide relevant job descriptions. ON-SITE The team will review staff and affiliate records.	
NA	The EAP does not provide work-life services.

STAFF SUPERVISION AND TRAINING
Sections 36-39

36. SUPERVISION OF STAFF AND AFFILIATES**

36-1. The EAP has supervision procedures that address the frequency of supervision/case consultation for both staff members and affiliates.

Evidence of Compliance
PRE-SITE
Provide supervision procedures.
ON-SITE
The team will interview supervisors.

36-2. EAP case consultation emphasizes:
a. the enhancement of staff member and affiliate skills;
b. the safety of the client; and
c. the quality of documentation in client records.

Evidence of Compliance
ON-SITE
The team will interview the clinical director.

36-3. All case consultation is described in narrative format (rather than simply initialed) and is documented in the client's record.

Evidence of Compliance
ON-SITE
The team will review client records.

36-4 EAP counselors document all critical incidents and cases which are potentially threatening to the client, the customer organization, or the EAP in the supervisor's critical incident log.

Evidence of Compliance
PRE-SITE
Provide critical incident procedures.
ON-SITE
The team will interview staff and review the incident log.

36-5. EAP counselors who have less than three years' EAP experience have at least one hour of individual case consultation for every 60 client contact hours.

Evidence of Compliance
PRE-SITE
Provide case consultation requirements.
ON-SITE
The team will interview relevant counselors and their supervisors.

36-6. **EAP counselors with more than three years' experience have at least one half hour of case consultation for every 90 client contact hours.**

Evidence of Compliance
PRE-SITE
Provide case consultation requirements.
ON-SITE
The team will interview relevant counselors and their supervisors.

36-7. **Case consultation with affiliates in diverse geographical locations occurs at least one hour for every 90 client contact hours per counselor.**

Interpretation: *Consultation can be provided by telephone or through written contact.*

Evidence of Compliance
PRE-SITE
Provide procedures for conducting telephone or electronic case consultation with affiliates.
ON-SITE
The team will interview affiliates.

37. SUPERVISION OF NON-CLINICAL PERSONNEL** _____

37-1. **The EAP monitors and evaluates how non-clinical staff members interact with clients and provides them with feedback and suggestions for improvement.**

Evidence of Compliance
PRE-SITE
Provide procedures for supervising non-clinical staff.
ON-SITE
The team will interview supervisors.

37-2. **Account manager supervision emphasizes the contract manager's ability to implement, monitor, and effectively coordinate EAP services.**

Evidence of Compliance
PRE-SITE
Provide procedures for supervising non-clinical staff.
ON-SITE
The team will interview account managers and their supervisors.

37-3. **Telephone intake workers meet with the clinical or program director for training and supervision at least monthly.**

Evidence of Compliance
PRE-SITE
Provide procedures for supervising non-clinical staff.
ON-SITE
The team will interview relevant staff and their supervisors.

37-4. **Account managers and virtual staff members receive face-to-face supervision or case consultation at least four times per year.**

Evidence of Compliance
PRE-SITE
Provide procedures for supervising account managers and virtual staff members.
ON-SITE
The team will interview supervisors.

38. GENERAL STAFF/AFFILIATE TRAINING AND DEVELOPMENT REQUIREMENTS**

38-1. **The EAP has a training and development program for counselors to:**
a. improve their knowledge, skills, and abilities as they relate to the EAP field; and
b. become aware of and sensitive to the diverse backgrounds and needs of clients.

Interpretation: *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
PRE-SITE
Provide a description of the training and development program, including curricula.
ON-SITE
The team will interview the training and development director, and review personnel records.

38-2. **The EAP annually conducts an internal needs assessment/performance appraisal with counselors to identify areas of individual and program weakness**.

Evidence of Compliance
PRE-SITE
Provide relevant procedures and data collection tools.
ON-SITE
The team will interview the personnel director and/or other appropriate staff.

38-3. **EAP counseling professionals complete professional development hours (PDHs), continuing education unit (CEU) requirements, or their equivalent each year at accredited colleges/universities, other state or provincially licensed institutions, or at EASNA, EAPA, or CEAP sponsored courses.**

Evidence of Compliance
PRE-SITE
Provide documentation of training expectations for staff.
ON-SITE
The team will review training records.

38-4. **Non-clinical staff participate in service training and complete a minimum of two hours of in-service training hours per year.**

Evidence of Compliance
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.

38-5. **All training for staff members is documented in a training log which includes:**

a. the attendees' names;
b. title of subject;
c. number of hours;
d. date of training; and
e. the presenter's name and credentials.

Evidence of Compliance
ON-SITE
The team will review the training records.

39. TRAINING CONTENT*

39-1. **Counselors possess knowledge and experience in the following areas:**

a. use of all clinical measurement tools (e.g., Global Assessment of Functioning);
b. instruction in assessment and referral;
c. short-term counseling/short-term problem resolution techniques; and
d. substance abuse.

Evidence of Compliance
PRE-SITE
Provide training material including curricula, training schedules, and attendance sheets.
ON-SITE
The team will review training records.

39-2. **The EAP documents the provision of training for counselors within the first three months of hire in the following areas:**

a. EAP core technology and the optional services of core technology;
b. EAP theory and practice; and
c. the application of counseling skills in a workplace setting.

Interpretation: *In the event that training will not be offered for a time exceeding three months, the EAP has a schedule of the upcoming trainings which staff will attend.*

Evidence of Compliance
PRE-SITE
Provide training material including curricula, training schedules, and attendance sheets.
ON-SITE
The team will review training records.

39-3. **The EAP documents orientation within the first three months of hire to counselors on:**

a. how to notify appropriate authorities of suspected cases of abuse and neglect, as required by federal and state or provincial law;
b. managing suicidal clients and traumatic events;
c. the EAP's harassment policy; and
d. the EAP's policy related to violence in the work place.

Interpretation: *Affiliates may receive orientation via an information packet.*

Evidence of Compliance
PRE-SITE
Provide training material including curricula, training schedules, and attendance sheets.
ON-SITE
The team will review training records.

39-4. **EAP counselors obtain, at a minimum, annual training in ethical issues, addictions, and crisis intervention.**

Interpretation: *At least one hour of annual retraining must be provided on new issues in addiction treatment.*

Evidence of Compliance
PRE-SITE
Provide training material including curricula, training schedules, and attendance sheets.
ON-SITE
The team will review training records.

39-5. **Non-counseling staff members and affiliates, such as account managers, possess knowledge and experience in the following areas:**

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
PRE-SITE
Provide training material including curricula, training schedules, and attendance sheets.
ON-SITE
The team will review training records.

39-6. **All EAP staff members and affiliates complete at least 30 minutes of documented annual training in client rights and ways to protect them.**

Evidence of Compliance
PRE-SITE
Provide training material including curricula, training schedules, and attendance sheets.
ON-SITE
The team will review training records.

39-7. The EAP provides special training on non-face-to-face counseling techniques before counselors provide telephone or on-line services.

Evidence of Compliance
PRE-SITE
Provide training material including curricula, training schedules, and attendance sheets.
ON-SITE
The team will review training records.

PROFESSIONAL PRACTICE
Sections 40-51

40. PROTECTION OF RIGHTS*

40-1. All clients receive summary information about their rights and responsibilities through a Statement of Understanding that is:

a. provided in writing;
b. explained at the beginning of his/her initial appointment;
c. distributed during his/her initial appointment;
d. available in the major languages of clients at host or customer organizations, including English;
e. effectively and appropriately communicated to persons with special needs; and
f. signed by the client.

Interpretation: *For clients receiving telephone services, counselors 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 on-line services will provide an electronic confirmation of their understanding.*

Evidence of Compliance
PRE-SITE
Provide the following: procedures for informing clients of their rights and responsibilities; summaries of rights and responsibilities in English and in the major language groups represented by clients; procedures for informing persons with special communication needs or language barriers of their rights and responsibilities. The team will review the Client Questionnaire.
ON-SITE
The team will interview counselors.

40-2. The Statement of Understanding sets forth 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.

Evidence of Compliance
PRE-SITE
Provide the Statement of Understanding.
ON-SITE
The team will interview counselors and clients when permissible.

40-3. Brochures, websites, and/or other information materials set forth the client's rights and responsibilities that include, but are 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, other eligible participants, or legal guardians in decisions regarding the services provided.

Evidence of Compliance
PRE-SITE
Provide brochures and other information materials, including the EAP's uniform resource locater (URL).

40-4. **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
PRE-SITE
Provide the relevant policy.

40-5. **The EAP communicates to each client that s/he has a right to list the preference for a counselor of a certain ethnicity, gender, sexual orientation, and religion.**

Evidence of Compliance
PRE-SITE
Provide training material, if any.
ON-SITE
The team will review client records.

40-6. **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
PRE-SITE
Provide the Statement of Understanding.
ON-SITE
The team will review client records.

40-7. **The EAP informs each client that if s/he uses a company computer, the transmissions are owned by the host or customer organization.**

Interpretation: *This standard includes employee computers used at the client's home.*

Evidence of Compliance
ON-SITE
The team will review client records.

41. ACCESS TO FILES AND RECORDS*

41-1. **Each client is informed at the beginning of service that a record is kept that documents all contacts, including the date and time of each occurrence, and services provided.**

Evidence of Compliance
ON-SITE
The team will review client records and interview clients when permissible.

41-2. **Client records are readily available to counselors and access to such records is limited to:**
- **a. the client, or as appropriate, his/her parent or legal guardian;**
- **b. staff members authorized to see specific records on a "need to know" basis;**
- **c. others outside of the EAP whose access to the information in the record is permitted by law; and**
- **d. any other transfers of information requested in writing by the client.**

Evidence of Compliance
PRE-SITE
Provide procedures regarding access to client records.
ON-SITE
The team will review records and interview staff members.

41-3. **Clients or their designated legal representatives are given complete instruction on how to access client records consistent with applicable rules, regulations and laws and the EAP's professional judgment as to the best interest of the clients.**

Evidence of Compliance
PRE-SITE
Provide client record access procedures.
ON-SITE
The team will interview staff and clients when permissible.

41-4. **EAP administrators and EAP headquarters' 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: *Confidentiality must be maintained during this process.*

Evidence of Compliance
PRE-SITE
Provide procedures for access to client records.
ON-SITE
The team will interview appropriate staff.

42. GRIEVANCE PROCEDURES**

42-1. **Written procedures provide applicants and 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 to the client 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 case record.**

(continued on next page)

Evidence of Compliance
PRE-SITE
Provide grievance policies and procedures. The team will review the quarterly grievance reports for the last two years.
ON-SITE
The team will review records of grievance proceedings, and interview clients when permissible.

42-2. 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
PRE-SITE
Provide copies of relevant procedures/mechanisms.
ON-SITE
The team will interview staff and clients when permissible.

42-3. The EAP makes available summary data regarding complaints to external auditors or reviewers, as requested.

Evidence of Compliance
PRE-SITE
Provide samples of summary data.

43. CONFIDENTIALITY AND PRIVACY PROTECTIONS FOR CLIENTS*

43-1. The EAP gives clients and potential clients written information that describes the EAP's confidentiality policy, and requires clients to sign a statement indicating their understanding of confidentiality rights and limitations.

Evidence of Compliance
ON-SITE
The team will review client records and statement of understanding.

43-2. Staff members, affiliates, volunteers, consultants, auditors, facilities staff, temporary employees, 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
ON-SITE
The team will review signed confidentiality agreements.

43-3. The EAP follows written policies and procedures governing access to, use of, and release or disclosure of information about clients and such policies meet applicable legal requirements under federal and state or provincial law.

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Evidence of Compliance
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.

43-4. **The EAP consults legal counsel regarding the confidentiality of records and the conditions under which they may be subpoenaed and seeks additional legal counsel, as necessary, when courts, public officials, investigative units, law enforcement bodies, or others request special or unusual information about an individual or family.**

Evidence of Compliance
ON-SITE
The team will interview the CEO or a senior management representative.

44. RELEASES*

44-1. **The EAP's confidentiality procedures includes procedures for obtaining a release of 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. an employee must be absent from work to participate in treatment or to be hospitalized;
c. there are any other circumstances that require communication by the EAP regarding a client's confidential communication.

Interpretation: *All releases must meet requirements set forth in federal and state or provincial laws.*

Evidence of Compliance
PRE-SITE
Provide consent procedures.
ON-SITE
The team will interview staff and clients when permissible, and review signed consent forms.

44-2. **Policies and procedures delineate the circumstances and conditions under which information may be released without written consent, including:**

a. medical emergencies;
b. court orders;
c. threats to harm self or others;
d. child abuse;
e. elder abuse or neglect; and
f. bona fide evaluations, audits or inspections.

Interpretation: *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. Written procedures should include guidance to personnel for reporting a person who is suspected to be a danger to him or herself or the community.*

Evidence of Compliance
PRE-SITE
Provide procedures for releasing information without written consent.
ON-SITE
The team will interview staff and clients when permissible.

44-3. **When the EAP receives a request for the release of confidential information about a person or family served, or the release of confidential information is necessary for the provision of services, the EAP assumes a protective role and prior to releasing such information:**

a. determines if the request is valid and in the best interest of the client;
b. obtains the informed, written consent of the person or 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: *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 subpoena, audit, duty to warn, or emergency situation.*

Evidence of Compliance
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.

44-4. **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 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;
c. the date the consent takes effect;
d. the date that the consent expires, not to exceed 90 days from the date consent is given for one time releases 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;
e. the name of the person to whom the information is to be given;
f. the name of the EAP staff person who is providing the confidential information; and
g. a statement that the person or family served may withdraw his/her consent at any time.

Interpretation: *Blanket consent forms signed by clients when service is initiated do not meet the requirements of this standard.*

Evidence of Compliance
PRE-SITE
Provide a blank consent form.
ON-SITE
The team will review case records.

44-5. **The EAP's confidentiality procedures address access to information for audits, inspections, and evaluations.**

Evidence of Compliance
PRE-SITE
Provide procedures for releasing information without written consent.
ON-SITE
The team will interview staff and clients when permissible.

44-6. **The EAP's confidentiality procedures address the release of information for workers' compensation and disability claims.**

Evidence of Compliance
PRE-SITE
Provide procedures relevant to releasing such information.
ON-SITE
The team will interview staff and customer organizations.

45. CONDUCT OF STAFF AND AFFILIATES**

45-1. **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
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.

45-2. **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. protection against favoritism in supervision and promotion; and
d. relatives and business partners being used for referrals.

Interpretation: *"Relatives" include those persons related to staff members, the board of directors or the owners, through family of origin, extended family, or marital affiliation. This standard still allows for the hiring of relatives, provided that relatives do not work within the same hierarchy of command.*

Evidence of Compliance	
PRE-SITE	
Provide policies regarding nepotism.	
ON-SITE	
The team will interview the CEO or a senior management representative, and supervisory personnel.	
NA	The EAP is a privately held for-profit organization.

45-3. **The EAP prohibits making or accepting payment or other consideration in exchange for referrals.**

Evidence of Compliance
PRE-SITE
Provide policies that prohibit making or accepting payment for referrals.

45-4. **The EAP's code of ethics includes a written policy about conflict of interest protections related to referrals and makes this policy available to all customer organizations, as applicable.**

Note: A corporate conflict of interest policy may be used to meet this requirement, if such a policy applies to EAP professionals.

Evidence of Compliance
PRE-SITE
Provide relevant conflict of interest guidelines.
ON-SITE
The team will interview staff regarding the scope and implementation of the conflict of interest policy.

45-5. **If an EAP contract permits an employee to continue with the EAP counselor upon completion of the number of sessions designated in the counseling contract, the following conditions apply:**

a. the contract clearly indicates that no self-referrals will be made to an EAP professional 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 professional; and
c. the client signs a freedom of choice understanding, which is maintained in the client's record.

Evidence of Compliance
ON-SITE
The team will review sample contracts and signed consents.

46. CONFLICTS OF INTEREST

46-1. **Personnel, board of directors members, and all contractors (including affiliates) follow a conflict of interest policy that enumerates situations that are considered to be conflicts of interest and the appropriate protocols for disclosure of conflicts, as necessary.**

Interpretation: *The standard does not require that the list of conflict situations be exhaustive, but such a policy should provide a framework for determining when a situation would constitute a conflict.*

Evidence of Compliance
PRE-SITE
Provide the conflict of interest policy.

46-2. **In not-for-profit EAPs, policy mandates that members of the board of directors who are involved in the EAP's business transactions or in current professional services, either disclose this relationship and do not participate in any vote taken in respect to such transactions or services individually or as part of a business or professional firm.**

Evidence of Compliance	
PRE-SITE	
Provide the conflict of interest policy.	
NA	The EAP is for-profit.

46-3. **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	
PRE-SITE Provide the policy regarding prohibition of preferential treatment. ON-SITE The team will interview board of directors members, personnel, and/or consultants as needed.	
NA	The EAP is privately held.

47. RESEARCH POLICIES AND PROCEDURES

NA The EAP does not conduct research.

47-1. **EAP policy clearly states whether or not it conducts, participates in, or permits research involving clients, and specifies the type of research conducted.**

Evidence of Compliance
PRE-SITE Provide policies that address whether, and to what extent, the EAP conducts, participates in, or permits research involving clients.

47-2. **An EAP that conducts or participates in human subject research has written policies and procedures to review the merits of each research project and evaluate the effects of research procedures on human subjects.**

Interpretation: *This standard includes all internally or externally conducted research that uses past or present clients.*

Evidence of Compliance
PRE-SITE Provide policies and procedures regarding research. ON-SITE The team will interview staff involved in research.

47-3. **An EAP that participates in human subject research complies with applicable rules, regulations, and laws governing human subject research, confidentiality, and health care.**

Evidence of Compliance
PRE-SITE Provide policies and procedures regarding research. ON-SITE The team will interview staff involved in research.

47-4. **An EAP that participates in human subject research complies with accepted ethical standards and criteria for human research in specific disciplines (e.g., psychology/medicine or addictions).**

Interpretation: *Statistical analyses, reports, and summaries are compiled and presented in a manner that masks the identity of the clients. Case examples and extracts from individual client records must be prepared, prior to dissemination, in a manner that masks the individual's identity. Clients interviews, either face-to-face or via telephone, must meet accepted ethical practices.*

Evidence of Compliance
PRE-SITE
Provide policies and procedures regarding research.
ON-SITE
The team will interview staff involved in research.

47-5. **Policies and procedures delineate how client data will be used for reports, research, and evaluation.**

Evidence of Compliance
PRE-SITE
Provide policies and procedures regarding research.
ON-SITE
The team will interview staff involved in research.

47-6. **When the research is completed, the EAP prepares and makes research reports available to funders.**

Evidence of Compliance
PRE-SITE
Provide a sample of research reports.
ON-SITE
The team will interview staff and participants involved in research.

48. INTERNAL RESEARCH REVIEW COMMITTEE

NA The EAP does not conduct research.

48-1. **An internal research review committee evaluates all research projects that use human subjects and actively monitors the research throughout its life cycle.**

Evidence of Compliance
PRE-SITE
Provide documentation that describes the functioning of the review committee.
ON-SITE
The team will interview review committee members.

48-2. **Members of the internal research review committee are:**

a. qualified by professional training and expertise to serve, as required by law;
b. experienced in the appropriate research area to be reviewed/monitored; and
c. external to the EAP and/or not directly associated with the research project or the EAP.

(continued on next page)

Evidence of Compliance
PRE-SITE
Provide documentation describing the functioning of the review committee.
ON-SITE
The team will interview committee members.

48-3. **Before initiating research, the EAP determines for each research project the process for:**
- **a. obtaining the informed consent of participants;**
- **b. providing adequate response to any potentially harmful effects; and**
- **c. monitoring compliance to standards and reviewing committee recommendations.**

Evidence of Compliance
PRE-SITE
Provide documentation that describes the functioning of the review committee.
ON-SITE
The team will interview committee members.

48-4. **Before initiating research, the EAP conducts a comprehensive review to determine the:**
- **a. adequacy of research design and methodology, including sample selection, use of controls, and statistical programs;**
- **b. qualifications and experience of investigators and all research staff;**
- **c. benefits of the project to the EAP field and to the EAP; and**
- **d. benefits and risks to participants.**

Evidence of Compliance
PRE-SITE
Provide documentation describing the functioning of the review committee.
ON-SITE
The team will interview committee members.

49. CLIENT PROTECTIONS RELATED TO RESEARCH* _____

NA The EAP does not conduct research.

49-1. **The EAP provides the following information to potential research subjects before obtaining their informed consent to participate:**
- **a. a description of benefits expected;**
- **b. a description of potential harm, discomfort, or risks; and**
- **c. a full explanation of the procedures to be followed, highlighting those that are experimental.**

Evidence of Compliance
PRE-SITE
Provide procedures that address client consent to participate in research.
ON-SITE
The team will interview staff involved in research and review written consents.

49-2. **The EAP obtains a signed consent, either in writing, telephonically, or electronically, from all participants or their legal guardians prior to engaging in research, and this consent includes:**

a. a statement that participation is strictly voluntary; and

b. a clause stating that consent to participate in research may be revoked at any time and that such revocation will not affect his/her status in the EAP or cause any changes in eligibility or access to service.

Interpretation: *A consent is not required with survey procedures or other research where no identifying information is recorded that links subjects to the data.*

Evidence of Compliance
PRE-SITE
Provide procedures that address client consent to participating in research.
ON-SITE
The team will interview staff involved in research.

49-3. **The EAP shows due regard for the right of clients to refuse to participate and safeguards the identity and privacy of clients in all phases of the research.**

Evidence of Compliance
PRE-SITE
Provide procedures and/or other documentation demonstrating that the EAP meets each element of the standard.
ON-SITE
The team will interview a representative of the EAP's institutional review board or ethics panel.

50. ETHICAL CONSIDERATIONS RELATED TO WEB-BASED SERVICES**

NA The EAP does not provide web-based services.

50-1. **The ability to access client data is restricted to staff for whom such data are necessary to complete their job-related responsibilities.**

Evidence of Compliance
PRE-SITE
Provide access procedures.

50-2. **The EAP's website includes a statement regarding how the user can authenticate the site.**

Interpretation: *The website must contain a statement indicating how a person can obtain information on the creation of the website.*

Evidence of Compliance
PRE-SITE
Provide the URL to the EAP's website.

50-3. **An EAP that uses a website for information and referral complies with the following requirements on confidentiality:**

a. the EAP does not make the list of site members or users available to any third parties without permission of the contract administrator or customer organization; and

b. the website adheres to a privacy policy that addresses confidentiality of information on clients.

Evidence of Compliance
PRE-SITE
Provide the website privacy policy.

50-4. **The EAP's website informs the client that confidentiality may be jeopardized when transferring client information to linked sites, if the related site does not have a privacy policy.**

Evidence of Compliance
PRE-SITE
Provide a description of how this concept is communicated.

51. ETHICAL CONSIDERATIONS RELATED TO THE USE OF SPECIFIC TECHNOLOGIES

NA The EAP does not provide services via the specific technologies as described in these standards.

51-1. **The EAP maintains policies on on-line confidentiality which safeguard information transmitted via on-line techniques**.

Evidence of Compliance
PRE-SITE
Provide policies regarding on-line confidentiality protections.

51-2. **An EAP that provides on-line and/or telephone services reviews and adheres to all pertinent ethical and legal codes or regulations related to each mode of service.**

Evidence of Compliance
PRE-SITE
Provide a description of pertinent ethical codes and how the EAP addresses them.
ON-SITE
The team will interview staff and the program director.

51-3. **An EAP that provides services via telephone informs the client when the call is being monitored for any reason.**

Evidence of Compliance	
PRE-SITE	
Provide telephone service procedures.	
NA	The EAP does not provide services via telephone.

51-4. **Case consultation with affiliates may occur electronically in the following circumstances:**
a. via email, provided that no identifying client data are exchanged;
b. via website, provided that password protections exist, modes of transmission are secure, and the site communicates that confidential information is being transmitted.

Evidence of Compliance
PRE-SITE
Provide procedures for conducting telephone or electronic supervision of affiliates.
ON-SITE
The team will interview affiliates.

51-5. **When client information is sent or transmitted, the EAP uses modes of transmission that are secure, (e.g., postal mail) that note the content's confidential nature, and that can verify receipt of such information.**

Evidence of Compliance
ON-SITE
The team will review a demonstration of client information transmission.

51-6. **Information is communicated via facsimile only in urgent circumstances and all such communications include a statement that the information is confidential and cannot be transmitted to a third party without permission.**

Evidence of Compliance
PRE-SITE
Provide procedures for transmitting information via facsimile.

51-7. **The format of electronically transmitted data complies with legal standards and requirements, and the organization:**
a. uses appropriate formats, codes, and identifiers to ensure the security and privacy of electronically transmitted data as required by law, and
b. develops and posts a privacy policy on all internet sites.

Evidence of Compliance
ON-SITE
The team will observe the record-keeping system, procedures, and safeguards.

ACCESS TO SERVICE AND REFERRALS
Sections 52-54

52. ACCESS PROCEDURES**

52-1. The EAP has access procedures that:
a. minimize barriers to the timely initiation of services or use of services; and
b. give priority to persons or families with urgent needs or in emergency situations.

Evidence of Compliance
PRE-SITE
Provide access procedures for each service.
ON-SITE
The team will interview counselors and clients when permissible.

52-2. According to procedure, 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 medical/personnel; and
c. mandatory referrals.

Evidence of Compliance
PRE-SITE
Provide access procedures.
ON-SITE
The team will interview staff.

52-3. The EAP addresses the communication needs of persons and families served by:
a. providing assistance, such as telephone amplification, sign language services, or other communication methods for persons who are deaf or hearing-impaired; and
b. providing or arranging for communication assistance for persons with special needs who have difficulties making their service needs known.

Evidence of Compliance
PRE-SITE
Provide procedures that address how the EAP meets the communication needs of persons with special needs.
ON-SITE
The team will interview personnel.

52-4. Regardless of the type of service, the EAP follows procedures for dealing with client problems that occur during and outside of work hours, and these procedures state that:
a. life threatening emergency situations are addressed immediately, 24 hours a day, 7 days a week, 365 days a year; and
b. non-life threatening emergencies are addressed by the end of the next business day.

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Evidence of Compliance
PRE-SITE
Provide written procedures.
ON-SITE
The team will interview staff members regarding emergency procedures.

52-5. The EAP follows industry defined benchmarks for telephone call abandonment rates, that require that:

a. calls on the EAP's toll-free service access line are answered within 25 seconds at call centers, on average; and
b. abandonment rates do not exceed five percent.

Evidence of Compliance
PRE-SITE
Provide written statements regarding industry best practices (benchmarks) for EAP telephone responsiveness.
ON-SITE
The team will interview the program director and review EAP telephone logs and records.

52-6. Clients 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, when the geography of the area allows;
b. are located near public transportation;
c. offer appointments at least one evening a week; and
d. offer clear directions.

Evidence of Compliance
PRE-SITE
Provide documentation that addresses the requirements of the standard.
ON-SITE
The team will interview counselors.

52-7. The EAP adjusts its staffing patterns and availability to accommodate working hours of employees at the host or customer organization.

Evidence of Compliance
ON-SITE
The team will interview the program director and observe how the hours are adapted for shift workers.

52-8. Written policies and procedures ensure that all clients are treated equitably and without favoritism, subject to limitations imposed by contractual obligations.

Evidence of Compliance
PRE-SITE
Provide non-discrimination policies and procedures.
ON-SITE
The team will interview staff members and clients when permissible.

53. OUTREACH

53-1. The EAP provides written information to customers, potential clients, referral sources, and subcontracting organizations upon request that describes:

a. the scope of services provided and their intended impact;
b. service accessibility and availability;
c. eligibility requirements;
d. hours of operation; and
e. any mandated disclosures.

Evidence of Compliance
PRE-SITE
Provide program brochures, statements of understanding, copies of written policies/procedures, advertising literature, websites, and contract samples. Also provide a fee schedule, if fees are charged.
ON-SITE
The team will interview administrative and program staff.

53-2. Mechanisms for providing information to covered employees 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
PRE-SITE
Provide brochures, orientation schedules and curricula, training schedules, and a description of internet and intranet resources.

53-3. EAP services provide toll-free and/or on-line access, as appropriate, 24 hours a day, 7 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
PRE-SITE
Provide brochures or other material describing telephone and/or on-line access.
ON-SITE
The team will interview staff and clients when permissible.

53-4. The EAP provides management of customer or host organizations with immediate access to such consultation.

Evidence of Compliance
ON-SITE
The team will interview managers of customer organizations and review records.

53-5. **The EAP offers targeted promotional material for eligible participants every 18 months, as directed by the host or customer organization.**

Evidence of Compliance
PRE-SITE
Provide targeted promotional material.
ON-SITE
The team will interview the appropriate staff member.

54. REFERRALS

54-1. **The EAP has written procedures that facilitate the referral of clients and the provision of consultation between the EAP and the host or customer organization.**

Evidence of Compliance
PRE-SITE
Provide referral procedures or guidelines.
ON-SITE
The team will interview personnel.

54-2. **The EAP makes referrals to host or customer organizations for service resources when the client requires service beyond the stated or contractual mandate of the EAP, or when specialty resources are not available through the EAP.**

Interpretation: *For example, in the case of a short-term therapy model it may be appropriate to refer the client for alcohol/drug rehabilitation or psychiatric care.*

Evidence of Compliance
PRE-SITE
Provide referral procedures or guidelines.
ON-SITE
The team will review client records.

54-3. **The EAP immediately notifies eligible clients if it cannot promptly provide specific needed services.**

Evidence of Compliance
PRE-SITE
Provide copies of written procedures that address the requirements of the standard.
ON-SITE
The team will interview personnel and clients when permissible.

54-4. **The EAP attempts to make referrals to organizations, agencies, or any providers of goods and services based on the unique needs and/or preferences of the client.**

Interpretation: *"Unique needs of the client" include level of care, geography, clinical requirements, or preferences for EAP professionals of a particular gender or ethnic background, when doing so is legally permissible.*

Evidence of Compliance
PRE-SITE
Provide referral procedures or guidelines.
ON-SITE
The team will interview staff and review client records.

54-5. **Written procedures delineate the EAP's responsibilities for providing follow-up, after care, and transition for clients served.**

Evidence of Compliance
PRE-SITE
Provide required procedures.
ON-SITE
The team will interview personnel.

54-6. **The EAP maintains a log of clients and referral sources for persons who are referred out of the EAP for services and such a log includes the:**

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 client record);
j. name of counselor making the referral; and
k. date the case is closed.

Evidence of Compliance
ON-SITE
The team will review the monthly log, which may be at a local location.

SERVICE DELIVERY
Sections 55-73

55. EAP SERVICE DESIGN**

55-1. The EAP service is designed to:

a. help organizations develop and maintain optimum work environments for their employees;
b. help employees become productive at work;
b. help covered employees and eligible participants with relationship, family, addiction, legal, emotional, stress, work-life balance, and other personal problems;
c. make referrals for individuals who have severe psychological problems and substance use disorders that require outpatient, partial, or residential treatment; and
d. provide preventative 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 addictive behaviors.

Evidence of Compliance
PRE-SITE
Provide mission statement, intake criteria, and a sample of contracts.
ON-SITE
The team will interview the CEO or a senior management representative.

55-2. The EAP communicates to host or customer organizations that they may use the EAP for:

a. training of supervisors; and
b. an array of consultation services on how to manage employees with performance problems.

Evidence of Compliance
PRE-SITE
Provide copies of program information and other descriptive summaries given to customer organizations.

55-3. The EAP provides the following services:

a. assessment and referral;
b. employee education and outreach;
c. critical incident stress management;
d. training to supervisors, managers, human resources, and union representatives;
e. management/supervisory consultation;
f. an EAP referral network for obtaining needed services that are not provided under the contract and/or are not available at the EAP; and
g. follow-up referrals.

Evidence of Compliance
PRE-SITE
Provide program descriptions or other relevant documentation.
ON-SITE
The team will interview the CEO or a senior management representative.

55-4. **The EAP maintains and implements a prevention plan that addresses the following components:**

a. outreach;
b. health promotion and wellness; and
c. coordination with healthcare providers.

Evidence of Compliance
PRE-SITE
Provide prevention plan and implementation strategy.
ON-SITE
The team will interview personnel.

55-5. **Topics addressed in the prevention plan are changed and updated to reflect the needs and feedback of the host or customer organization and its employees.**

Evidence of Compliance
PRE-SITE
Provide the prevention plan.
ON-SITE
The team will interview personnel.

55-6. **The EAP emphasizes the importance of prevention in all of its activities and provides at least one primary prevention activity annually, if the host or customer organization agrees.**

Evidence of Compliance
PRE-SITE
Provide the prevention plan.
ON-SITE
The team will interview personnel.

55-7. **The EAP develops and offers educational sessions on dealing with the problems of daily living and wellness topics for all employees.**

Evidence of Compliance
PRE-SITE
Provide program descriptions or other relevant documentation.
ON-SITE
The team will interview the CEO or a senior management representative.

56. SPECIAL SERVICE DELIVERY CONSIDERATIONS**

56-1. When a child or adult who is a victim of abuse and neglect is the primary client, the EAP intervenes with more intensive services and provides more frequent monitoring and coordination with providers.

Evidence of Compliance
PRE-SITE
Provide procedures or other documentation that describes interventions with victims of abuse and neglect.
ON-SITE
The team will interview personnel, and review client records.

56-2. The EAP follows procedures that include backup and support for managing cases that involve threats of violence, including homicidal or suicidal ideation.

Evidence of Compliance
PRE-SITE
Provide procedures and telephone resources as required.
ON-SITE
The team will interview personnel.

56-3. Service planning and delivery meet the diverse and unique needs and preferences of clients.

Interpretation: *Diverse and unique needs and preferences may be related to age, sex, gender, sexual preference, physical limitations, ethnicity, culture, and others.*

Evidence of Compliance
PRE-SITE
Provide procedures or other documentation that address diversity issues in service planning and delivery.
ON-SITE
The team will interview personnel.

56-4. The EAP provides culturally diverse and accessible services that include:

a. active recruitment of a diverse work force;
b. assumption of service responsibility in rural and remote areas;
c. assumption of service responsibility for persons with visual, hearing, and physical impairments; and
d. diversity training for all professional staff and affiliates associated with the program.

Evidence of Compliance
PRE-SITE
Provide training materials, service locations, and other written documents that address the requirements of the standard.
ON-SITE
The team will interview staff and affiliates.

57. EAP STAFFING PATTERNS AND RATIOS**

57-1. The EAP maintains at least one full time equivalent counselor or affiliate to 3,500-4,000 employees at risk as the normal maximum ratio (which assumes a 45-minute, telephone or face-to-face eight-session model), and 4,000-5,000 employees assuming a six-session model.

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 a CEO considered more than a half-time counselor.

Evidence of Compliance
PRE-SITE
Provide a description of staff/employee ratios.
ON-SITE
The team will interview the management personnel.

57-2. An EAP that provides information and referral or assessment and referral maintains at least one counselor 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 a CEO considered more than a half-time counselor.

Evidence of Compliance
PRE-SITE
Provide a description of staff/employee ratios.
ON-SITE
The team will interview the management personnel.

57-3. No full time equivalent counselor averages more than 28 hours per week of face-to-face counseling or telephone services over any four-week period.

Evidence of Compliance
PRE-SITE
Provide relevant documentation.
ON-SITE
The team will interview counselors and review appointment logs.

57-4. EAP counselors with clinical backgrounds are available by telephone for calls to respond to emergencies, provide face-to-face counseling/short-term counseling/short-term problem resolution if required, and access appropriate resources if needed, either directly or by referral.

Evidence of Compliance
PRE-SITE
Provide emergency preparedness procedures, and job descriptions of counselors assuming emergency calls.
ON-SITE
The team will interview staff and review client records.

57-5. **The EAP maintains a consulting relationship, at a minimum, with a board-certified psychiatrist who provides on-call consultation.**

Evidence of Compliance
ON-SITE
The team will review the contract between the EAP and the psychiatrist.

58. CLIENT RECORDS*

Note: All policies and procedures pertaining to client records apply to subcontractors and affiliates as well as staff offices.

58-1. **The EAP maintains a record that addresses EAP service use for each client.**

Evidence of Compliance
PRE-SITE
Provide relevant procedures regarding client records.

58-2. **All record entries contain only that information which is necessary for properly serving the client.**

Evidence of Compliance
PRE-SITE
Provide record entry procedures.
ON-SITE
The team will review records.

58-3. **The EAP follows a policy that addresses:**

a. how long affiliates may retain client records; and
b. whether they are able to maintain a copy of the record after the record is returned to the EAP.

Evidence of Compliance
PRE-SITE
Provide the policy on sharing of records between affiliates and the EAP.

58-4. **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 all assessments, if any;
d. service plans;
e. progress notes of services provided; and
f. the closing summary.

Evidence of Compliance
ON-SITE
The team will review client records.

58-5. **The client record also contains:**

a. a detailed account of the supervision or case consultation, including the data for the recommendations and actions taken; and

b. follow-up plans.

Evidence of Compliance
PRE-SITE
Provide record entry procedures.
ON-SITE
The team will review client records.

58-6. **The closing summary includes:**

a. a report of changes in condition regarding the assessed problem;

c. referral or further action by client and employer; and

d. actions and recommendations for further action by the EAP provider.

Evidence of Compliance
PRE-SITE
Provide record entry procedures.
ON-SITE
The team will review client records.

58-7. **When necessary due to the nature of individual needs and/or the type of service being provided by the EAP, basic information is supplemented by psychological, medical, or biopsychosocial evaluations.**

Evidence of Compliance
PRE-SITE
Provide record entry procedures.
ON-SITE
The team will review client records.

58-8. **All record entries for services are completed, signed, and dated by the person who provided the service.**

Evidence of Compliance
PRE-SITE
Provide record entry procedures.
ON-SITE
The team will review client records.

59. INTAKE PROCESS**

59-1. Distinct written procedures govern the intake process for face-to-face counseling, telephone, and on-line services, as applicable.

Evidence of Compliance
PRE-SITE
Provide intake procedures.
ON-SITE
The team will interview intake staff.

59-2. At the point of intake, intake personnel immediately establish if the client is experiencing an emergency.

Evidence of Compliance
PRE-SITE
Provide intake procedures.
ON-SITE
The team will interview supervisors of intake staff.

59-3 The EAP presents in written format, or explains telephonically with documentation, the following to covered employees and participants:

a. referral resources and referral procedures;
b. the service and the number of sessions or contacts based on contractual agreement;
c. follow-up procedures; and
d. the means used to evaluate program effectiveness.

Evidence of Compliance
ON-SITE
The team will review client records.

59-4. Standardized screening procedures are used at intake with clinical services (e.g., Beck Depression Inventory).

Evidence of Compliance
PRE-SITE
Provide screening procedures.
ON-SITE
The team will interview personnel.

59-5. The EAP bases its intake methods on the services it provides and the needs of clients.

Evidence of Compliance
PRE-SITE
Provide intake procedures.
ON-SITE
The team will interview supervisors of intake staff.

60. GENERAL ASSESSMENT REQUIREMENTS*

60-1. At the initial assessment or intake interview, EAP counselors collect demographic information and determine the nature of the request or presenting issue.

Evidence of Compliance
PRE-SITE
Provide assessment procedures.
ON-SITE
The team will review client records.

60-2. 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
PRE-SITE
Provide assessment procedures.
ON-SITE
The team will review client records.

60-3. EAP assessment includes the presenting problem, work-related issues, and diagnosis when required by the EAP contract, in addition to other relevant standard assessment components.

Evidence of Compliance
PRE-SITE
Provide assessment procedures.
ON-SITE
The team will review client records.

60-4. The EAP complies with protocols for determining whether to retain a case for short-term counseling/short-term problem resolution, and whether it is appropriate to refer a case for ongoing treatment to outside or approved resources.

Interpretation: *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
PRE-SITE
Provide required protocols.
ON-SITE
The team will interview supervisors.

60-5. **If a counselor or other provider determines that the client is at imminent risk of danger to self or others, the EAP provides legally required notification to the employer, family, police, or other appropriate persons.**

Evidence of Compliance
PRE-SITE
Provide procedures or protocols regarding assessing risk of danger to self or others.
ON-SITE
The team will interview counselors and review cases where clients were assessed to be at risk.

61. CLINICAL ASSESSMENTS *

Note: The term "clinical" may be used interchangeably with the term "biopsychosocial."

61-1. **Clinical assessments, if performed, contain, at a minimum, the following:**

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, aptitudes;
f. work history and military service, as applicable;
g. education; and
h. date of last medical exam.

Evidence of Compliance
PRE-SITE
Provide assessment procedures.
ON-SITE
The team will review client records.

61-2. **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 the physical, emotional, behavioral, or social condition; and
d. when appropriate, legal, vocational and/or nutritional needs of the client.

Evidence of Compliance
PRE-SITE
Provide a biopsychosocial assessment form.
ON-SITE
The team will review client records.

62. CLINICAL SERVICES**

62-1. **The EAP provides clinical services through a comprehensive, formal delivery system.**

Evidence of Compliance
PRE-SITE
Provide a description of the service delivery system.
ON-SITE
The team will interview the clinical director.

62-2. **The case manager or EAP counselor who follows up on referrals to an outside agency documents the results for annual evaluation by the clinical supervisor and external reviewers, if applicable.**

Evidence of Compliance
PRE-SITE
Provide follow-up procedures and data collection procedures and tools.
ON-SITE
The team will interview the clinical supervisor and relevant staff.

62-3. **Ongoing case consultation (within the confidentiality provisions and with a signed Release of Information from the client, and adherence to reasonable accommodation laws) is available to managers as they help clients in the reintegration process.**

Evidence of Compliance
ON-SITE
The team will interview personnel.

62-4. **With documented permission from the client, the EAP makes at least one attempt to conduct telephone follow-up, within two weeks of the provision of services to an outside resource to assess the client's:**

a. satisfaction with service;
b. current level of functioning; and
c. attainment of problem resolution.

Evidence of Compliance
PRE-SITE
Provide follow-up procedures.
ON-SITE
The team will review client records.

63. CRITICAL INCIDENT STRESS MANAGEMENT* ——————

63-1. **The EAP provides critical incident stress management (CISM) and supportive services when a host or customer organization faces crisis situations.**

Evidence of Compliance
PRE-SITE
Provide documentation describing critical incident stress management (CISM) and related services.
ON-SITE
The team will interview staff providing CISM and customer organizations that have received CISM.

63-2. **Each EAP contract includes a clear definition of a critical incident.**

Evidence of Compliance
PRE-SITE
Provide documentation with contract language describing CISM and related services.
ON-SITE
The team will interview staff providing CISM.

63-3. **The host or customer organization is consulted to determine if CISM is appropriate.**

Evidence of Compliance
PRE-SITE
Provide procedures on CISM.
ON-SITE
The team interview representatives from host or customer organizations.

63-4. **The EAP trains its CISM counselors to assess the level of intervention that is required in particular situations.**

Evidence of Compliance
PRE-SITE
Provide procedures on CISM.
ON-SITE
The team will interview counselors.

63-5. **For CISM situations, 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
PRE-SITE
Provide procedures on CISM.
ON-SITE
The team will interview personnel and review data.

63-6. **Trained and qualified counselors provide CISM.**

Evidence of Compliance
PRE-SITE
Provide job descriptions of CISM counselors.
ON-SITE
The team will interview counselors.

64. INFORMATION AND REFERRAL, AND ASSESSMENT AND REFERRAL SERVICES*

64-1. **The EAP can demonstrate a rapid and effective response in linking clients in need with appropriate EAP resources and supportive interventions.**

Evidence of Compliance
PRE-SITE
Provide data indicating the response time.
ON-SITE
The team will interview personnel.

64-2. **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
PRE-SITE Provide follow-up procedures. ON-SITE The team will interview personnel and review records.

64-3. **For each unit of education, consultation, work-life, and legal services, the EAP maintains separate policies and procedures addressing eligibility, access, financial terms, and other essential aspects.**

Evidence of Compliance
ON-SITE The team will review contracts.

64-4. **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	
PRE-SITE If the service has a particular focus, provide documentation of such. ON-SITE The team will interview information and referral counselors and supervisors.	
NA	The EAP does not operate with a particular focus.

65. TRAINING OF SUPERVISORS AND UNION REPRESENTATIVES* -

65-1. **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
ON-SITE The team will interview the training and development director.

65-2. **The EAP provides individual supervisors and human resource professionals with consultation regarding referral to the EAP for management of employee job performance and behavioral problems.**

Evidence of Compliance
PRE-SITE Provide training schedule and curricula. ON-SITE The team will interview EAP personnel and employer representatives.

65-3. **Supervisory training also addresses how to recognize signs of deteriorating job performance and the proper means of documenting this in the personnel record.**

Evidence of Compliance
PRE-SITE
Provide training material.
ON-SITE
The team will interview supervisors.

65-4. **The EAP provides training sessions on a schedule to implement the EAP within four months of program start-up at the discretion of the host or customer organization, 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
PRE-SITE
Provide training schedule and curricula.
ON-SITE
The team will review evidence that such training has occurred.

65-5. **Training sessions on the schedule to implement the EAP also include:**

a. how to deal with performance problems when personal problems are a contributing factor;
b. procedures to deal with referrals resulting from confirmed drug test, and/or Department of Transportation regulations, and/or the Drug Free Workplace Act; and
c. the expectation that a supervisor-initiated referral is based solely upon performance issues or a request for assistance by the employee.

Interpretation: *The procedures described in (b) refer to United States legislation and programs and do not apply in Canada and other countries.*

Evidence of Compliance
PRE-SITE
Provide training schedules and curricula.
ON-SITE
The team will interview supervisors.

65-6. **The EAP provides training to supervisors and managers to help them handle commitments with employees who have behavior problems that affect employee performance.**

Evidence of Compliance
PRE-SITE
Provide training schedules and curricula.
ON-SITE
The team will interview supervisors and managers.

66. SHORT-TERM COUNSELING/SHORT-TERM PROBLEM RESOLUTION*

NA **The EAP does not provide short-term counseling/short-term problem resolution.**

66-1. **For clients with emotional problems, qualified counselors document, as permitted by law, the results of their assessments and 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
PRE-SITE
Provide procedures that describe how the EAP assesses and diagnoses clients with emotional problems.
ON-SITE
The team will interview counselors responsible for conducting clinical assessments and review client records.

66-2. **The EAP counselor establishes brief service goals, i.e. behavioral and measurable, with the client based on the assessed problem(s).**

Evidence of Compliance
PRE-SITE
Provide service planning procedures.
ON-SITE
The team will interview clients when permissible and review client records.

66-3. **The service plan builds on strengths, engages clients in resolving their problems or requests, and is focused on timely resolution of the needs and goals presented.**

Evidence of Compliance
PRE-SITE
Provide service planning procedures.
ON-SITE
The team will review client records.

66-4. **The EAP counselor documents progress notes for each session with the client in the client record.**

Evidence of Compliance
ON-SITE
The team will review client records.

67. ORGANIZATIONAL DEVELOPMENT*

NA The EAP does not provide organizational development.

67-1. 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
PRE-SITE
Provide training schedules and curricula.
ON-SITE
The team will interview personnel.

67-2. The EAP offers education and 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
PRE-SITE
Provide a description of the EAP's education and consultation services, including training materials.
ON-SITE
The team will interview staff of host or customer organizations.

67-3. The EAP provides consultation via telephone or face-to-face depending on the preferences of the host or customer organization.

Evidence of Compliance
ON-SITE
The team will review customer contracts.

67-4. The EAP maintains a written disclaimer in contracts which provides that its advice is not and cannot be construed as legal opinions in the course of providing consultation to customer organization management.

Evidence of Compliance
ON-SITE
The team will review contracts.

67-5. **The EAP maintains disclaimers in its promotional material to clarify that opinions expressed are informational and are not meant to represent the employer or the service.**

Evidence of Compliance
PRE-SITE
Provide promotional or educational material.

68. DRUG FREE WORKPLACE SERVICES*

NA The EAP does not provide Drug Free Workplace Services.

68-1. **The EAP offers a needs assessment to determine what components of a Drug Free Workplace are most appropriate for each host or customer organization and for which components the EAP will be providing services.**

Evidence of Compliance
PRE-SITE
Provide a sample of needs assessment procedures and tools.
ON-SITE
The team will review completed needs assessments.

68-2. **The EAP provides, upon request, samples of Drug Free Workplace policies and procedures in compliance with federal and state or provincial guidelines, where drug/alcohol testing is part of the program.**

Evidence of Compliance
PRE-SITE
Provide samples of Drug Free Workplace policies.
ON-SITE
The team will review policies that have been designed for three customer organizations.

68-3. **The EAP provides employee education regarding alcohol and other drug related issues, including abuse, misuse and addiction, and assists in the development of an implementation schedule.**

Evidence of Compliance
PRE-SITE
Provide sample training programs and implementation schedules.
ON-SITE
The team will interview personnel who provide training.

68-4. **The EAP provides training to supervisors and union representatives on the Drug Free Workplace program, and how to detect and assist troubled employees.**

Interpretation: *When drug testing is a part of the program, training must also include information on testing policies and procedures.*

Evidence of Compliance
PRE-SITE
Provide sample training programs and implementation schedules.
ON-SITE
The team will interview personnel who provide training.

68-5. **When drug/alcohol testing is part of the Drug Free Workplace program, the EAP's role is clearly defined in policies and/or procedures which protect the anonymity and confidentiality of self-referred clients.**

Evidence of Compliance
PRE-SITE
Provide policies and procedures.
ON-SITE
The team will review client records.

68-6. **The EAP offers a comprehensive assessment, referral, and monitoring program for employees who test positive or self-identify as drug or alcohol users, and has policies and procedures governing each step of the program.**

Evidence of Compliance
PRE-SITE
Provide a description of the program.
ON-SITE
The team will interview the program director.

68-7. **Assessment, referral, and monitoring procedures 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
PRE-SITE
Provide procedures and forms.
ON-SITE
The team will review client records.

68-8. **When the EAP provides Substance Abuse Professional services, it complies with Department of Transportation regulations and other federal and state or provincial regulations.**

Evidence of Compliance	
PRE-SITE Provide a description of the EAP's compliance with these regulations. ON-SITE The team will review client records and interview personnel.	
NA	The EAP does not provide Substance Abuse Professional services.

68-9. **The EAP has standardized procedures for evaluating the effectiveness of each host or customer organization's Drug Free Workplace program.**

Evidence of Compliance
PRE-SITE Provide evaluation procedures. ON-SITE The team will review evaluations.

69. WORK-LIFE SERVICES*

NA The EAP does not provide work-life services.

69-1. **Materials distributed as part of work-life education are current and well researched.**

Evidence of Compliance
PRE-SITE Provide relevant materials. ON-SITE The team will interview the person responsible for researching work-life materials.

69-2. **The EAP keeps a record of clients who request work-life services.**

Evidence of Compliance
ON-SITE The team will review the record.

69-3. **The EAP follows procedures for assessment practices, which include the use of a standardized work-life assessment tool.**

Evidence of Compliance
PRE-SITE Provide assessment procedures.

69-4. **Work-life training received by staff members and affiliates is documented in a centrally located training log which includes:**

a. the employee's or affiliate's name;
b. title of training attended;
c. hours and dates of training; and
e. proof of attendance.

Evidence of Compliance
ON-SITE
The team will review the training log.

70. LEGAL SERVICES*

NA The EAP does not provide legal services.

70-1. **The host or customer organization and the EAP establish whether self-referral for associated legal services is permitted.**

Evidence of Compliance
ON-SITE
The team will review contracts with customer organizations.

70-2. **The EAP ensures that all attorneys used have expertise in the area in which they practice or self-refer.**

Evidence of Compliance
PRE-SITE
Provide credential verification procedures.
ON-SITE
The team will interview senior management staff responsible for legal services contacts.

70-3. **The EAP has a procedure that requires the legal services provider to make referrals only to attorneys who practice in the state in which the client resides.**

Evidence of Compliance
ON-SITE
The team will review contracts.

70-4 **The EAP informs clients of the types of legal services that are covered by the EAP program (e.g., legal advice, services other than representation, the number of hours allowed, etc.).**

Evidence of Compliance
ON-SITE
The team will review client records.

70-5 **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
PRE-SITE
Provide fee schedules or arrangements.
ON-SITE
The team will review client records.

70-6. **At intake, the legal services provider explores other issues relevant to the referral and makes referrals back to the EAP, as appropriate.**

Interpretation: *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
ON-SITE
The team will review client records for evidence that such a discussion occurred.

70-7. **Legal services providers used by the EAP follow the EAP's procedures for making self-referrals.**

Evidence of Compliance	
PRE-SITE	
Provide self-referral procedures and/or the agreement with the legal services provider that demonstrates this understanding.	
ON-SITE	
The team will review contract requirements.	
NA	The host or customer organization and EAP do not permit self-referral for legal services.

70-8. **If the host or customer organization and EAP permit self-referral for legal services, the legal services provider provides 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	
PRE-SITE	
Provide self-referral procedures.	
ON-SITE	
The team will review contracts.	
NA	The host or customer organization and EAP do not permit self-referral for legal services.

70-9. **The EAP requires all legal services providers to report to it 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
PRE-SITE
Provide reporting guidelines provided to legal services providers.
ON-SITE
The team will review contracts.

71. SPECIAL CONSIDERATIONS FOR ON-LINE AND TELEPHONE SERVICES

NA The EAP does not provide services via on-line and/or telephone modalities.

71-1. **An agreement exists between the client and counselor before telephone and/or on-line services are used to provide EAP services.**

Evidence of Compliance
ON-SITE
The team will review client records.

71-2. **The EAP uses telephone and/or on-line 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 on-line services;
c. the client has mobility problems;
d. the client experiences scheduling problems with face-to-face counseling; or
e. a supervisor determines there are other extenuating circumstances that merit the use of telephone or on-line services.

Evidence of Compliance
PRE-SITE
Provide telephone and/or on-line service procedures.
ON-SITE
The team will interview telephone and/or on-line staff.

71-3. **The EAP requires all telephone counselors 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 cell telephones, except in an emergency.

Evidence of Compliance PRE-SITE Provide telephone service procedures.	
NA	The EAP does not provide telephone services.

71-4. **The EAP requires counselors to use a hard-wired, non-portable telephone and informs all clients of the preferred use of such phones to maximize privacy during the session.**

Interpretation: *Portable telephones are permissible in emergency situations.*

Evidence of Compliance PRE-SITE Provide telephone service procedures. ON-SITE The team will observe telephones.	
NA	The EAP does not provide telephone services.

71-5. **The EAP uses the following safeguards in the provision of services via on-line and/or telephone modalities:**

a. verification of parent/guardian consent for minor clients;
b. discussion of procedures for contacting the counselor when s/he is not on-line or telephone accessible; and
c. obtaining the name of at least one counselor on call for crisis liability.

Evidence of Compliance PRE-SITE Provide on-line and telephone service procedures. ON-SITE The team will interview on-line and telephone counselors.

71-6. **The EAP maintains procedures that address:**

a. situations that will not be treated over the telephone or on-line (e.g., emergency situations);
b. verification of the identity of the client;
c. prevention of faulty transmissions;
d. appropriate firewalls in place that involve use of passwords; and
e. referral sources and subcontractors in a resource file for external review.

Evidence of Compliance PRE-SITE Provide on-line and telephone service procedures. ON-SITE The team will interview on-line and telephone counselors.

72. SPECIAL CONSIDERATIONS FOR USE OF WEBSITES

NA The EAP does not provide services via website.

72-1. All EAP content is reviewed by qualified professionals trained in the area of information provided and transcribed to a website by a professional web master.

Evidence of Compliance
PRE-SITE
Provide procedures regarding website content/job descriptions.
ON-SITE
The team will interview the web master.

72-2. Language standards for internet content, such as XML, are used for web-based information.

Evidence of Compliance
ON-SITE
The team will interview MIS personnel.

72-3. The EAP follows procedures that address firewalls and encryption standards used to ensure the security of web pages.

Evidence of Compliance
PRE-SITE
Provide the required procedures.
ON-SITE
The team will interview the MIS director.

72-4. The EAP follows procedures that govern use of email referrals.

Evidence of Compliance
PRE-SITE
Provide procedures for email referrals.

72-5 The EAP informs clients that records are maintained for all email requests for information and on-line counseling services provided, and explains:

a. how long session data will be preserved; and
b. the possibility of technological failure.

Evidence of Compliance
PRE-SITE
Provide relevant procedures.
ON-SITE
The team will review client records.

72-6. **The EAP follows timelines that specify how often the website is updated to ensure that information is current, reliable, and free from error.**

Evidence of Compliance
PRE-SITE
Provide procedures.
ON-SITE
The team will interview the web master.

72-7. **The EAP website includes the following:**

a. how to contact a live, qualified EAP counselor;
b. confidentiality information; and
c. phone numbers to use in case of an emergency.

Evidence of Compliance
PRE-SITE
The team will visit the website.

73. INTERNATIONAL

NA The EAP is incorporated in North America and operates only in North America.

73-1. **Multinational EAP corporations that serve their employees overseas ensure that all EAP providers are qualified according to the relevant standards in this section and possess the terminal degrees of those countries in which they operate.**

Evidence of Compliance
PRE-SITE
Provide relevant job descriptions.
ON-SITE
The team will interview the personnel director and review personnel records.

73-2. **EAPs indigenous to 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
PRE-SITE
Provide relevant job descriptions.
ON-SITE
The team will interview the personnel director and review personnel records.

73-3 **International EAPs adhere to all laws and customs in the countries in which they operate and serve clients.**

Interpretation: *This 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
PRE-SITE
Provide a narrative describing applicable laws and customs and describe compliance.

73-4 **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
PRE-SITE
Provide a copy of the code of ethics.

73-5. **All international affiliates receive an orientation to ethical standards and/or a written copy that appears in the EAP's policies and procedures.**

Evidence of Compliance
PRE-SITE
Provide a copy of orientation materials.

73-6 **Where impossible to comply with the accepted 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	
PRE-SITE	
Provide policy on cultural sensitivity.	
NA	The EAP is able to meet the Standards.

73-7 **The program design of international EAPs incorporate mechanisms for communication and promotion of the program in a culturally sensitive fashion.**

Interpretation: *This includes communication materials, supervisor training, and employee orientations, as defined by the Standards.*

Evidence of Compliance
ON-SITE
The team will interview personnel.

GLOSSARY OF EAP TERMS

ACCESSIBILITY OF SERVICE: The opportunity for clients to obtain relevant services, with attention to service location, hours of operation, affordable fees, and no barriers that impede entrance or use by people with disabilities.

ACCOUNT MANAGER: The staff person who is the liaison between the customer organization and the EAP provider who is responsible for ensuring that the needs of the customer are being addressed.

ACCREDITATION: A system of professional self-regulation that demonstrates that a particular program or organization has met a stringent set of criteria.

ADVANCED DEGREE: A degree at the master's level or beyond from an accredited institution of higher education.

AFFILIATES: Independent contractors who are retained by the EAP to perform the same service as EAP counselors.

AFTER CARE: Additional services provided, either directly or by referral, beyond the period of primary service. Aftercare services offer continuity and supportive follow-up.

ALCOHOL ABUSE: Consumption of alcohol in a manner and degree that impairs functioning and harms or endangers the health, safety, and well-being of the user or those with whom the user comes in contact.

ALTERNATIVE DELIVERY SYSTEMS: Alternative modes of service delivery for mental health treatment, for example, home-based services.

ANNUAL BENEFITS MAXIMUM: This is the total amount a benefit plan will pay for an enrollee's health costs in a given year. If the costs exceed this amount, the enrollee usually must pay for the rest of the costs.

APPOINTMENTS: Time allocated for counseling session, can be: routine, urgent, or emergency.

APPROPRIATENESS: The degree to which a particular service or activity is best suited to an individual's needs; is not excessive, unduly intrusive, or restrictive; is anticipated to be effective in achieving the desired and specified service results; and is adequate or sufficient in quantity to address the problem.

ARCHITECTURAL BARRIERS: Physical impediments to the use of a facility by the physically handicapped, such as stairs, inaccessible toilet facilities, or other factors that restrict the use of the building or facility by persons with disabilities.

ASSESSED PROBLEM: Determined by the EAP professional counselor, this often differs from the client's presenting problem. It refers to the diagnosis of the client's problem.

ASSESSMENT: An evaluation that relies on professional expertise and skills to collect and analyze information to understand and describe the nature of service needs and preferences of clients. Assessment, as in needs assessment, is also used to determine priorities of service planning.

ASSESSMENT AND REFERRAL EAP MODEL: An EAP that concentrates on the assessment of presenting problems of the employee and/or eligible participant(s), the referral of individuals who have problems to appropriate resources, and systematic follow-up.

BENCHMARKS: Quantifiable measurements of best practices in the industry.

BENEFIT: In insurance, a sum of money provided in an insurance policy payable for certain types of loss, or for covered services, under the terms of the policy.

BENEFIT PACKAGE: A contractually defined set of health services, the cost of which is borne in full or in part by a health insurance plan.

BEST PRACTICES: Recommended services, programs, and practices for clients that are based on the most recent validated research and expert consensus about service results.

BILLING UNIT: The unit agreed upon by the organization and the purchaser to be the basis for payment; e.g., per client hour of service or other element of service.

BIOPSYCHOSOCIAL ASSESSMENT: A type of professional assessment that describes the summary judgment derived from a multidimensional evaluation of psychological, sociocultural, and environmental factors that are components of a presenting problem. It includes results of tests and evaluations, brief expressive descriptions of the problem, an inventory of actual and potential assets and resources, the prognosis, and analysis of what is needed or planned to resolve the problem. A biopsychosocial assessment is also called a psychosocial diagnosis.

BRIEF TREATMENT: A form of therapy which focuses on the essential issue for a short period of time that is worked on with the counselor and the client in a goal directed plan.

BYLAWS: Adopted by the EAP for the regulation of its internal affairs, in particular, the actions of the board of directors and its relationship to the chief executive officer and any advisory board associated with the EAP.

CAPITATION: A method of health care financing and delivery involving the provision of a specified set of services to an individual for a predetermined periodic payment, without regard to the level and type of actual services provided. Capitation payments are usually figured "per enrolled member."

CAPITATION RATE: The amount of monthly reimbursement per covered life in a capitated contract.

CASE CONSULTATION: The provision of regular consultation and oversight of an EAP counselor's clinical work by a senior mental health professional.

CASE COORDINATION: A process of coordinating services on behalf of an individual client. This includes ongoing assessment of needs and responding to changing needs through referral or provision of direct services, coordination, monitoring of services by providers, and appropriate termination. Case coordination is usually part of the casework process.

CASELOAD: The clients receiving service (individual/family/group) for whom a given employee is responsible.

CASE MANAGEMENT: The systematic management of client care that ensures levels and amounts of service in accordance with approved guidelines for specific identified issues. Case management also involves ongoing contact with provider and client to monitor service delivery, and service progress as the basis to approve, modify, or deny ongoing service.

CASE MANAGER: A person responsible for the management of a client's case. This may include a telephone intake, monitoring of counseling hours, getting client feedback, and follow-up until case closure.

CASE RECORD REVIEW: The process of reviewing client case records at least quarterly to evaluate the quality and appropriateness of EAP intake and referral procedures, assessments, service plans, practitioner interventions, clinical documentation, and termination procedures. The EAP also reviews case records more frequently to determine if clients display significant changes in clinical status, functional status, quality of life, and level of satisfaction with the organization's services.

CASE REVIEW: A regular and periodic examination of a client's service needs and problems, service delivery goals and objectives, progress toward goals, intervention plans, and the timelines required to achieve them. The EAP counselor and supervisor frequently conduct this review but it may also involve others.

CERTIFICATION: A designation of professional competence in which an individual completes a course of study and successfully passes all required examinations.

CERTIFIED EMPLOYEE ASSISTANCE PROFESSIONAL (CEAP): Established by EAPA in 1986, the CEAP provides a means to ensure that practitioners, regardless of background, posses a standard level of knowledge necessary for employee assistance programming. The program grants certified status to practitioners who pass a written examination. In order to qualify to take the examination, a practitioner depending upon educational level must posses two-three years' experience in EAP programming, including a minimum of 2,000-3,000 hours devoted to employee assistance programming.

CHEMICAL DEPENDENCY: Physiological and psychological dependence on a chemical, such as alcohol, tobacco, and narcotics, which results in increased tolerance and in withdrawal symptoms when the chemical is removed.

CHIEF EXECUTIVE OFFICER: The person authorized to assume the day-to-day management of the EAP and who is accountable for the EAP's performance. This person may also be known as an administrator, director, or president.

CLIENT: The individual, family, group or organization that seeks assistance through EAP services.

CLIENT PARTICIPATION FORM (CPF): Also known as a client feedback or satisfaction survey form, the CPF is given to the employee by the EAP. The survey is anonymous, confidential, and voluntary and contains questions related to the service provided by the EAP. The survey should be completed by the client immediately upon completion of service and mailed to a third party evaluator.

CLIENT RECORD: A written and authenticated compilation of information that describes and documents the assessment and present, prospective, and past services to the client consumer. Compare with **SERVICE RECORD** which is the compilation of information on a particular service that is not client specific.

CLINICAL PERSONNEL: An organized group of professional persons trained in the mental health disciplines that provide the treatment services of the EAP, including assessment and referral, CISM, and short-term counseling/short-term problem resolution. Clinical personnel who assume case responsibility meet any applicable regulatory requirements and possess the terminal degree set by their respective professional organizations or regulatory environment. Clinical personnel generally include clinical social workers (MSW or DSW/PhD in social work), clinical or counseling psychologist (PhD or PsyD), psychiatric nurses (MS), certified marriage or family therapists, certified pastoral counselors, and board eligible psychiatrists. Where additional disciplines or degrees are acceptable, it is stated in the standard of each service section.

CLINICAL SERVICES: Direct services delivered by professional, credentialed, licensed staff e.g., assessment and referral, short term counseling/short-term problem resolution.

CLOSED CASE: When a case is officially terminated and follow-up completed.

CODE OF ETHICS: An explicit and written statement of the values, principles, and operating rules of a profession that regulates the conduct of its members.

COMBINED EAP: An EAP that offers internal and external EAP services.

COMPLAINT: For clients, an expression of verbal or written dissatisfaction that can include but not be limited to: service, manner of treatment, service results or experiences. For employees, a complaint can include staff matters such as supervision, evaluations, promotions or demotions, the work environment, and overall service.

COMPLAINT RESOLUTION: The completion of an appeal procedure.

CONFIDENTIALITY: An ethical and practice principle that requires the protection of information shared within a professional-client relationship. An organization that upholds confidentiality prohibits personnel from disclosing information about persons served without their written consent. Confidentiality policies and procedures typically address the protection of client service records, appropriate employee behaviors, and the operation of management information systems (MIS).

CONFLICT OF INTEREST: A conflict of interest arises when an EAP staff member, board member, or affiliate has a personal, professional, or financial interest in a transaction or relationship that either interferes with or appears to interfere with his/her ability to objectively carry out his/her responsibilities to the EAP.

CONSULTANT: A person who provides specialized or technical advice or services to an EAP for specific purposes on a contractual or fee basis.

CONTRACT (for EAP services): A formal, usually written agreement between two or more parties that specifies the services, or products to be provided in exchange for some form of compensation. Also known as "purchase of service arrangement."

CORPORATION: An artificial person or legal entity created by or under the authority of the laws of a state or nation, composed, in some instances, of a single person and his/her successors in a particular office but usually consisting of an association of several individuals.

- A for-profit organization is one that is owned or staffed by professionals that are intended to make a financial profit by offering a specific service or set of services. These organizations may provide services similar to those offered by nonprofit organizations, except that the charges to the consumers may be higher and/or established on bases different than the rate-setting criteria employed by nonprofit organizations.
- A not-for-profit organization is one established to fill some social purpose other than monetary reward. As used in these standards, a nonprofit organization is a private, voluntary social organization funded from a variety of sources, such as client fees, third parties, public contributions, philanthropic contributions, and government grants and contracts.
- A privately-held organization is one whose shares, or at a minimum voting shares, are held by a group of private shareholders who actively participate in the conduct of business.
- A publicly-traded organization is one whose stock is held by and available to the public. Shares of the corporation are typically traded on a securities exchange or over-the-counter.

COST-BENEFIT ANALYSIS: The evaluation estimates a dollar value for the benefits the EAP provides to the customer or host organization. Cost-benefit analysis measures the direct and indirect costs, including program operational expenses and costs attributable to the employee's service goals, in order to determine the total dollar expenditure for implementation of the program as compared to the costs that would be incurred without the program. These two amounts are weighted to evaluate whether the program, given its estimated cost, can be justified economically.

COST-EFFECTIVENESS ANALYSIS: The analysis addresses whether a program is being conducted at an acceptable level of effectiveness, in terms of optimum return per dollar expended. It quantifies program outcomes, most likely in dollars, and compares this with the available program costs. It does not require a projection of intangible or future savings for various types of programs.

COUNSELORS: EAP employees and affiliates in a counseling/direct service capacity.

COUNSELOR CREDENTIALING: The process used to authorize, contract with, or employ EAP practitioners to provide services to clients. When conducting an EAP credentialing evaluation, the primary criteria used are the counselor's education, experience, resume, license, certification, and registration.

COVERED DAYS: The number of days that the insurer will accept for services rendered. Covered days may be their insurance "kick ins."

COVERED LIVES/COVERED INDIVIDUALS: Eligible participants in an EAP.

CRISIS INTERVENTION: Brief therapeutic interventions offered to persons or families who are incapacitated or severely disturbed by crises or other physical and psychological traumas. Reassurance, suggestion, environmental manipulation, and referrals for medication and hospitalization may be provided as part of the service plan. Differs from critical incident stress debriefing (see next), which focuses on providing assistance to larger groups and communities following traumatic events.

CRITICAL INCIDENT STRESS MANAGEMENT (CISM): Any situation that causes a work group to experience strong reactions, which have the potential to interfere with present or future productivity.

CULTURE: The customs, habits, values, skills, technology, beliefs, and religious, social, and political behaviors of a group of people in a specific period of time.

CULTURAL RESPONSIVENESS: The degree to which an EAP modifies or tailors its system of service delivery, including personnel selection, training and development, assessment, service planning and implementation, client care monitoring, and program evaluation to the age, ethnicity, gender, cultural, religious, physical ability and national diversity in its service population. Sometimes referred to as "cultural sensitivity" or "cultural competence." See **SERVICE POPULATION**.

CUSTOMER (ORGANIZATION): The employer that purchases the EAP service.

CUSTOMER ORGANIZATION: An employer, organization, union or association who signs a contract with an EAP organization to pay all or part of the costs for the employee assistance program.

CUSTOMER TRANSPARENT: A database that is designed to maintain the anonymity of the client by using unique identifiers that do not permit the user to track any specific individual, i.e., no name, social security number, or employee number is identified.

DEPENDENCY: An individual, family, or group's reliance on other people, institutions, or things for existence and support.

DETOXIFICATION: The process by which drugs or other harmful substances are removed from a person's body for a time period sufficient to restore adequate physiological and psychosocial functioning.

DIAGNOSIS: The process by which social, physical, environmental or mental problems and their underlying causes are identified and a plan of action formulated toward resolution of the problem. The process involves the collection and analysis of relevant information. See **ASSESSMENT**.

DIAGNOSTIC AND STATISTICAL MANUAL (DSM) OF THE AMERICAN PSYCHIATRIC ASSOCIATION: A clinical desk reference for classifying mental illness according to diagnostic categories.

DISCHARGE: A voluntary or involuntary process describing the point at which an organization no longer assumes responsibility for provision of services to a particular person or persons served. Also known as "termination."

DOMAIN NAME SYSTEM (DNS): A distributed internet directory service used mostly to translate between domain names and internet protocol addresses and to control internet email delivery. Most internet services rely on DNS to work, if DNS fails, websites cannot be located and email delivery stalls.

DRUG ABUSE: Misusing a chemical substance in a manner that is detrimental to an individual's physical or mental well-being and/or the safety and well-being of others.

DRUG ADDICTION: A state of physiological dependence that results from the abuse of chemical substances. In the absence of the substance, an individual experiences symptoms of withdrawal.

DRUG FREE WORKPLACE: A prevention program to reduce employee substance abuse and improve health, safety, and worksite productivity, by providing services which include, but are not limited to, education for staff and training for supervisors, equitable, reliable drug testing, and access to assistance and treatment.

DRUG TESTING POLICIES: Company procedure outlined for the collection of urine specimen and the laboratory analysis of such and the reporting to appropriate designated medical personnel before informing the employee.

EAP CORE TECHNOLOGY: EAP Core Technology functions are consultation with training of, and assistance to work organization leadership, confidential and timely problem identification, use of constructive confrontation, referral of employee clients for diagnosis, consultation to work organizations in establishing and maintaining effective relations, consultation to work organizations to encourage availability of and employee access to employee health benefits, and identification of the effects of EAP services on the work organization and individual job performance.

ELDER CARE: Provision of varied services for older clients needing varied forms of assistance.

ELIGIBLE PARTICIPANTS: Those individuals (i.e., spouse, significant other, child, grandchild, step-child or adopted child for whom the employee is legally responsible) who meet criteria to receive paid benefits and the services provided by the EAP.

ELIGIBILITY: The process of determining whether an individual, family, group, or community meets the specific criteria/qualifications to receive goods, benefits, or service.

EMPLOYEE ASSISTANCE PLAN/PROGRAM (EAP): Assessment, information, referral, education, and other employment-related services provided under a contract or arrangement with an employer, union, or organization.

EMPLOYEE ASSISTANCE PROFESSIONALS ASSOCIATION (EAPA): This organization began as The Association of Labor/Management Administrators and Consultants on Alcoholism and is a self-supporting organization that serves as a professional body for EAP practitioners.

EMERGENCY: An emergency exists when an individual is in significant distress and is a real and present danger to him/herself or others. An emergency requires immediate, direct intervention by a licensed mental health professional.

EMPLOYEE EDUCATION: Regular scheduled programs by the EAP providing information on a variety of subjects.

EMPLOYEE FEEDBACK: The feedback process allows the employee to report, in an anonymous and confidential manner, whether or not his/her needs were met appropriately (with professionalism, courtesy, and in a prompt manner) and if services were delivered efficiently and effectively.

EMPLOYEES (PERSONNEL): The body of employees, consultants, and/or volunteers that carries out tasks of the organization, performing under the organization's administration and/or supervision. The customer organization may define which full-time and/or part-time paid and/or contracted personnel it wishes to cover by its EAP Services.

EQUAL OPPORTUNITY POLICY: A written statement that describes an organization's commitment to ensure that all current and prospective employees are afforded equal employment opportunities.

ETHNICITY: An orientation toward and identification with the shared national origin, religion, culture, or language of a population group.

EVALUATION: Review and assessment of organizational operations, programs and services. The scientific gathering, analysis, and reporting of data. It determines the worth or merit of a program designed to change people's knowledge, behavior, or attitudes.

EXPENDITURE: A payment or obligation to pay for some products or services received that is typically planned for through the annual budget process of an organization as a specific anticipated operating expense.

EXTENSIBLE MARKUP LANGUAGE (XML): Designed especially for web documents to allow designers to create their own customized tags, enabling the definition, transmission, validation, and interpretation of data between applications and between organizations.

EXTERNAL EAP: Any employee assistance program that is contracted for by an outside organization, (as opposed to one that is operated by a host organization).

FEE FOR SERVICE: A charge made to consumers of service or those responsible as their fiscal intermediaries for a specific service. A method of reimbursing on the basis of each incident of services rendered.

FINANCIAL AUDIT: An independent review by a certified independent public accountant that certifies that an organization's financial report fairly and accurately reflects its financial status.

FINANCIAL STATEMENTS, REVIEW OF: A service provided by a certified public accountant in accordance with accounting review standards that provides some assurance to an organization's board of directors and other interested parties as to the reliability of financial data and the conformity of such data to Generally Accepted Accounting Principles. A review is based on representations made by management and is of a much more limited scope as compared to an audit that requires the gathering of audit evidence and an appraisal of internal control.

501©(3) ORGANIZATIONS: The tax status granted by the US Internal Revenue Service to signify a type of non-profit public interest or public service organization. Organizations covered by these standards are classified as 501© (3) organizations, which indicates that they are tax exempt. See **CORPORATION**.

FOLLOW-UP: Procedure for contacting a client after counseling or service delivery is completed to ensure client's well-being.

FOREIGN: A country other than the United States or Canada.

GOVERNING BODY: A person or persons with the legal authority and responsibility to set policy and oversee the operations of an organization. Generally, the governing body is a group, such as a board of directors.

GRIEVANCE: A grievance is a formal expression of dissatisfaction or discomfort with a service outcome or manner of treatment by the person served; an employee's dissatisfaction with his/her treatment or handling, often in regard to personnel matters such as supervision, evaluation, promotion or demotion. (Applicable to clients receiving service or personnel).

GUARDIAN, LEGAL: A person or persons with the legal authority and responsibility to manage the affairs of another person. The term is frequently used in lieu of the parent of a minor child and in standards concerning the rights of minor children in service.

HIGH RISK TREATMENT: Any procedure that interferes with the right of a client receiving service to self-determination, involves risks about which a client should be informed, involves physical or psychological pain, or has the potential for harm. Examples may include, but are not limited to: interventions with clients who resist service for drug or alcohol problems, wilderness/recreational activities that challenge physical abilities and contain inherent risks, or unusual approaches to behavior management, the use of physical restraint, and the use of psychotropic medication.

HOST ORGANIZATION: The larger corporate framework that maintains an internal EAP.

HUMAN RESOURCES: The department in a company responsible for the personnel in that organization and all the regulations and services that apply to the employees in a particular organization.

HUMAN SERVICES: Policies and programs to meet and maintain the physical, emotional, social, educational, and spiritual needs of people and to assist them to develop their own capacity to enhance the quality of their lives.

HUMAN SERVICES DEGREE: Usually referred to in these standards in the context of "qualified by a degree in social work and/or by a degree in a related human service field." For purposes that involve the provision of direct services and assumption of case responsibility, training in social work, psychology, psychiatric nursing, psychiatry, mental health counseling, rehabilitation counseling, pastoral counseling, marriage and family therapy, and human services are the related degrees.

IMPAIRMENT: A loss or abnormality in physiological, psychological, or mental structure or functioning, such as paralysis of a limb, mental retardation, or blindness.

INCIDENT REPORT: A document describing a high risk event or one at variance with policy, procedure, practice, or usual experience.

INDEMNIFICATION: Protection for the directors, officers, board members, and personnel of an organization against any civil or criminal action, suit or proceedings resulting from their activities with the organization. Indemnification should include all reasonable expenses, including legal fees, except when it is determined that the person is liable for negligence or misconduct in the performance of his or her duties.

INFORMATION AND REFERRAL EAP MODEL: An EAP that provides basic information and refers individuals who have problems to appropriate resources.

INFORMED CONSENT: When a client receiving service or his/her legal guardian explicitly grants permission to the service provider and organization to use a specific intervention, such as diagnosis, treatment, or participation in research. The consent is predicted on full disclosure of the facts to enable the client to make a decision based on knowledge of the risks and alternatives.

INDICATOR: A described activity, event, outcome, or benchmark used for measurement and in monitoring the quality and outcome(s) of service.

IN-SERVICE TRAINING: Educational programs provided by an organization to help personnel become more knowledgeable, skilled, and effective in accomplishing the specific tasks of their work or meeting the overall objectives of the organization. Such training often occurs on the job and for short time periods.

INTAKE: The entry point at which eligibility is assessed against established criteria and a preliminary evaluation of the request for service occurs.

INTEGRATED PROGRAM: A program that combines both EAP and managed behavioral care services into one program, thereby cutting costs and providing quality services.

INTERNAL PROGRAM: Any employee assistance program whose EAP counselors or employee assistance clinicians are employed by the host organization.

INTERNATIONAL EAP SERVICES: An EAP program offered in a separate country other than the employer.

JOB DESCRIPTION: Explicit obligations and specific tasks required of personnel as a condition of employment. Such descriptions are in writing and may include educational, experience, and skill requirements associated with the job.

LEGAL SERVICES: Prepaid services that are offered under contract and provided by EAPs to subcontracting legal services provider, which usually include ½ hour free consultation, and then a reduced fee if self-referred.

MANAGED BEHAVIORAL CARE (MBC): A service that monitors and controls the utilization of mental health and substance abuse services, specifically concentrating on costs, while maintaining satisfactory levels of quality care.

MANAGED CARE EAP MODEL: An EAP model that has written criteria regarding appropriateness of care. The written criteria address inpatient, outpatient, partial care, intensive outpatient and transitional care for alcohol abuse, drug abuse, and mental and nervous (ADM) disorders that are based on sound clinical/treatment practice.

MANAGED HEALTH CARE: A formal network of health care providers, third-party funding sources, and other fiscal intermediaries who provide a full array of health and mental health services for those participating in the network. As a program, managed care refers to the systematic administration of health care (including mental health) delivery systems within the context of fiscal responsibility.

MANAGEMENT INFORMATION SYSTEM (MIS): An administrative method used by organizations to gather, process, analyze, maintain, and disseminate data required for effectively carrying out the goals of the organization. The MIS produces monthly or quarterly reports and documents the activities of the EAP.

MANAGEMENT: The staff responsible for the management functions of the EAP, including managing the EAP's fiscal and staff resources and its service delivery. Such staff determine organizational goals, acquire and allocate resources to carry out a program, coordinate activities toward goal achievement, and monitor, evaluate, and make needed changes in processes and procedures to improve the likelihood of goal achievement. The term is frequently used synonymously with Administration.

MANAGEMENT REFERRAL: See **REFERRAL TO EAP** (supervisory, medical, and union).

MANDATED BENEFITS: Minimal benefit levels established by statutes enacted by state legislatures. These vary from state to state and can add to overall health care costs. ERISA exempts employers who are self-insured from these mandates. Other exceptions have been made for "basic" low cost, insurance products that can be offered to the uninsured segment of the workforce.

MANDATORY REFERRAL: When an employee has a positive drug test or when job retention is in grave question due to poor performance.

MAP LINX: A geographical information system, which enables clinicians to generate a map of a caller's zip code area, city or county, to identify affiliate locations on the map, and to look-up information about the affiliate.

MONITORING: An evaluation activity that involves a periodic review of client services, organizational activities, or conduct. Specifically, monitoring is an activity of case coordination, whereas more broadly, monitoring is an evaluation technique used in overall quality assurance.

NATIONAL CREDENTIAL VERIFICATION DATA BANK: A national compilation of data regarding health care providers, suppliers, or practitioners used primarily to alert users to actions taken against such persons/entities, including: civil judgments; federal or state criminal convictions; actions by federal or state licensing or certification agencies; any other adjudicated actions, clinical privilege actions, and professional society actions. These data banks may not be generally accessible by the public, but access may be obtained through a credential verification organization. Examples of such data banks include the Healthcare Integrity and Protection Data Bank and the National Practitioner Data Bank.

NEEDS ASSESSMENT: An initial survey that is undertaken to determine the nature of the work population to ascertain its special needs.

NO SHOW: A client who does not keep a scheduled appointment without informing the counselor. Such clients should not be counted in the utilization rate.

NON-CLINICAL STAFF: Non-counselors or non-direct service staff, including receptionists.

NONPROFIT ORGANIZATION: See **CORPORATION**.

ON-LINE SERVICES: A variety of offerings provided through web-site passwords. It can include self-assessment, resources, educational information, as well as coaching.

OPENED CASE: An EAP client that is currently being seen.

ORGANIZATIONAL DEVELOPMENT: An EAP service which involves assessing the corporate culture and working with the host or customer organization, as a whole, to bring about change in a positive manner.

OUTCOMES OF SERVICE: The results achieved as a result of interventions as measured against service objectives.

OUTCOME EVALUATION: A process to determine if a program is achieving its objectives and whether the results can be attributed to the interventions provided. Outcome evaluations range from rigorous experimental designs employing pre- and post-measurements to more subjective judgments made by consumers of service and service providers.

OUTREACH: Contact initiated by the EAP to identify persons in need of services, to provide information to them about services and benefits, and to encourage the use of appropriate services.

PEER REVIEW (CLINICAL PEER REVIEW PROCESS): Evaluation process whereby professionals from similar backgrounds review the clinical work of their associates.

PERSONNEL: The body of employees, consultants, and/or volunteers that carries out tasks of the organization, performing under the organization's administration and/or supervision.

PERSONNEL DEVELOPMENT: Activities conducted both in and out of the organization to improve the ability of personnel to perform their assigned tasks, to assume high levels of responsibility, and to serve better the needs of persons served.

POLICIES: Written statements of principles and positions that guide organizational operations and services that are approved by the governing body of the organization. Operational procedures (sometimes called administrative policy) are the designated methods by which policy is implemented. Some organizations have both board approved and administrative policies.

PRACTICE: Established actions or ways of proceeding in the regular performance of organizational duties. Policies and procedures often guide practice.

PRESENTING PROBLEM: Particular reason why the client comes to the EAP.

PREVENTION: Actions taken by mental health and social service professionals to minimize and/or eliminate social, psychological, or other conditions that cause or contribute to physical and emotional illness and/or socioeconomic problems. Prevention occurs at the individual, group, organization and societal levels, in which conditions are addressed that enhance opportunities to achieve positive fulfillment.

PRIVATELY HELD FOR-PROFIT: See **CORPORATION.**

PROCEDURES: The designated methods by which broad policies are implemented and organizational operations are carried out, usually contained in writing by an operating or program manual as an adjunct to board-approved policies. Administrative policy is a term used by some organizations to describe such operational procedures developed by management.

PROFESSIONAL PERSONNEL: Individuals who have met standards of specialized education or training, who have demonstrated their mastery of a systematic body of knowledge, and who comply with the code of ethics required by their professional groups. Professionals in family and children's organizations traditionally include, but are not limed to social workers, psychologists, psychiatrist, and other physicians, nurses, teachers, nutritionists, gerontologists, certified alcohol and drug abuse counselors, persons with advanced degrees in related human service fields, and educators with various specialties.

PROGRAM: A term used to describe a system of services offered by an organization. Sometimes the word "program" is used interchangeably with the word "service" or to describe specific programs.

PROMOTION (MARKETING): Marketing of a program.

PROTOCOLS: Instruments and procedures that are used.

PSYCHOTROPIC DRUGS: Medications used by psychiatrists and other physicians to help people achieve psychological or emotional changes, including reduction in depression, anxiety, and other manifestations of mental or emotional disturbances.

PUBLICLY TRADED FOR-PROFIT ORGANIZATION: See **CORPORATION.**

QUALITY: In this context, the extent to which contemporary and generally recognized standards for professional practice are met and exceeded and desirable service outcomes achieved.

QUALITY IMPROVEMENT (QI): A comprehensive ongoing management strategy that incorporates intensive stakeholder involvement, systematic data collection and analysis, information sharing, and corrective action in order to improve the functioning of an organization.

REFERRAL: The process of linking EAP clients with appropriate resources outside the EAP to resolve personal matters.

REFERRAL TO EAP (SUPERVISORY, MEDICAL, and UNION): Mechanism whereby clients are sent or urged to go to an EAP.

REFERRAL OUT (BY COUNSELOR): When the assessment indicates longer service is needed, the counselor will select an individual provider or facility to send the client.

REGISTRATION: Officially or legally certified by a government officer or board.

RELEASE OF INFORMATION FORM: Document to be signed by a client allowing a counselor to describe confidential information to a specified source for a limited period of time.

RELIABILITY: The stability or consistency of a measure.

REOPENED CASE: A client who returns with a different problem.

RESEARCH: For purposes of EAP accreditation, research includes all forms of internal or external human subject research involving clients except internal program evaluation and outcomes research, or educational projects performed by students and interns that are part of their professional training.

RETURN-TO-WORK AGREEMENT: Formal document signed by an employee that delineates specific conditions for being able to return to work as drug testing, and as attendance at an EAP.

RISK MANAGEMENT: A systematic process of evaluating and reducing risks to which personnel, clients receiving service, or an organization of facility may be exposed.

SUBSTANCE ABUSE PROFESSIONAL (SAP): Professional designated in the United States Department of Transportation regulations with specific responsibilities.

SAFETY-SENSITIVE POSITION: Jobs that require knowledge of secret material or positions that are considered hazardous.

SCREENS: Use of instruments that have been validated to determine client's diagnosis.

SECURITY OF ELECTRONIC DATA: Systems to protect confidential information in the EAP.

SELF-HELP GROUPS: Voluntary associations of nonprofessionals who share common problems or needs and meet together over a period of time to provide mutual support and exchange information and resources useful in problem-solving. These groups are self-directed.

SELF-REFERRAL: An employee who voluntarily enters an EAP program.

SENIOR MANAGEMENT: Employees of the EAP who assume responsibility for administrative, procedural, and/or policy-level decisions related to EAP operations.

SERVICE: One or more organization-operated programs or activities having a common general objective and involving deployment of the organization's material and human resources in a planned and systematic manner. An organization that publicly promotes or identifies itself in written materials as offering a service, which is licensed to deliver a service, or which assigns personnel and/or space or allocates financial resources to a service is considered to offer this service.

SERVICE PLAN: A written plan of action based on the assessment of client needs and strengths, that identifies the request for service, sets goals and describes a strategy for achieving these goals and engaging in joint problem solving with the client. Also known as a "treatment plan."

SERVICE POPULATION: Members of a group or target population that the organization's program of services is designed to service. The boundaries of the designed service population may be set on the basis of a variety of factors, such as specific social problems, age, and/or needs. Service population and defined community have been used interchangeably, but the defined community is usually the larger group from which the service population is drawn.

SEXUAL HARASSMENT: Abusive, discriminatory, and/or unfair treatment of a person because of his or her sex.

SHORT-TERM COUNSELING/SHORT TERM PROBLEM RESOLUTION: A therapeutic modality which focuses on a single-problem and seeks to resolve it in a time limited manner.

SOCIAL SERVICES: Activities to enable individuals, families, and groups to cope with social and psychological problems that interfere with their functioning.

STAFF MEMBERS: EAP employees (not affiliates).

STANDARD: A statement of best practice against which an organization is evaluated.

STATEMENT OF UNDERSTANDING: A document that explains the parameters of an EAP that clients are asked to sign before being seen by a counselor.

SUBCONTRACTORS: A company or firm formally retained by the EAP to provide a specific service e.g., legal services.

SUPERVISION: Assumption of responsibility for the direct oversight and inspection of the act or process of accomplishing a function or activity. In EAPs, this usually refers to the monitoring of the clinical work.

SUPERVISORY REFERRALS: A mechanism to address the troubled employee who chooses not to seek assistance on his/her own. The effectiveness of the referral is dependant upon how early the problem is recognized, how the employee is confronted regarding his/her situation, and the manner in which the assistance is offered.

SUPERVISORY TRAINING OR TRAINING FOR SUPERVISORS: An essential ingredient of an EAP that educates managers as to what an EAP is, how to refer, and the availability of consultation.

TELEPHONE SERVICES: Assistance offered via the telephone by a professional.

TERMINAL DEGREE: The degree that is considered acceptable by a given field for independent practice (e.g., MSW)

THIRD COUNTRY NATIONALS (TCN): EAP programs provided to individuals who live in a country other than their own native country and other than the corporate headquarters of the client company.

THIRD PARTY AUDIT: An independent and objective review of EAP-delivered services over a specified historical period of time.

THIRD PARTY PAYER: Any organization, public or private, that pays or insures health or medical expenses on behalf of beneficiaries or recipients (e.g., Blue Cross/Blue Shield, commercial insurance companies, Medicare and Medicaid). The individual generally pays a premium for such coverage in all private and some public programs. The organization then pays bills on the individual's behalf; such payments are called third-party payments and are distinguished by the separation between the individual receiving the service (the first party), the individual or institution providing it (the second party), and the organization paying for it (the third party).

TOLL-FREE ACCESS LINE: The initial point of contact for EAP clients. In an EAP, the access line is typically used to make an appointment. In managed behavioral care (MBC) programs, the access line is used to delineate types of calls, refer clients to providers, and fulfill gate-keeping functions.

TRAINING PROGRAMS: Education given to EAP managers and supervisors about the EAP and how they can access it for consultation and refer employees.

UNIFORM RESOURCE LOCATER (URL): A networked extension of the standard filename concept, that points to a file in a directory, that exists on any machine on a network and can be served via any of several different methods.

UNIT COST: A calculation of the price or value of a fixed amount or unit of service that takes into account the sum of all organizational expenditures involved in the provision of that service.

URGENT: Those services that are not considered to be life threatening to the client, but are of sufficient severity to necessitate prompt intervention. See **EMERGENCY**.

UTILIZATION RATE: The number of employees seen by the program divided by the number of employees in the company. A client who does not keep a scheduled appointment without informing the counselor should not be counted in the utilization rate. Note: The EAP must designate the numerator and denominator for purposes of utilization. Training to supervisors and other units are not acceptable factors to be addressed in utilization.

VALIDITY: An estimate of the degree to which an instrument, protocol, or test reflects what it is intended to measure.

VIRTUAL EMPLOYEES: Employees working from a location other than an EAP office for up to five (5) days per week using conducive technology.

WEBSITE: An on-line display/publication of materials and information that may otherwise be reviewed in hard copy, accessed through the Internet.

WORK-LIFE: A program offered as part of the EAP, which addresses a variety of services such as dependent care, legal, educational, and financial issues, and seeks to help the employee achieve a satisfactory allocation of time between the demands of work and his/her personal life.

XML: see **EXTENSIVE MARKUP LANGUAGE**