

# Evaluating Employee Assistance Programs: 15 Questions Workplaces Should Ask to Strengthen the Mental Health Safety Net

Posted by [Sally Spencer Thomas](#) [April 1, 2019](#)



Employee assistance programs (EAPs) may be one of the best-kept secrets for many employers. Instead, EAP resources should be widely publicized to help encourage participation by managers, employees, and their family members. Providing support services for employees' personal and workplace problems that have the potential to negatively affect work can promote vibrant workers and mitigate risk.

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Many employers simply “check the box” when signing up for this benefit, figuring health insurance will cover the mental health needs of their employees; however, most employers really don’t know what the EAP services entail or the value the services can bring to a workplace. With that said, we must remember that not all EAPs are created equal, and EAP services vary greatly. The following are some common features.

- Biopsychosocial assessments, including substance use assessments
- Individual and family counseling
- Financial and legal coaching and referrals for counseling
- Referrals for additional services, with follow-up
- Psychoeducation through workshops, newsletters, and other communication for personal and workplace concerns including but not limited to stress management, parenting, mental health literacy, relationships, and organizational change and individual crisis prevention, crisis response, and ongoing support
- Mediation and team development
- Leadership consultation, coaching, and development
- Fitness for duty evaluations
- Suicide risk assessment, treatment, and “postvention” (i.e., what to do after a suicide)
- Staff training on best practices on how to support someone in distress

Sometimes the services are very cursory, such as a brief telephone assessment and referral by a contracted outside provider. Other EAPs provide robust and high touch services like 24-hour support, online assessment and information, telephone and in-person assessment and counseling, on-demand crisis consultation, onsite workshops, incentivized mental wellness promotion, and much more. Just like with many things, you get what you pay for, so employers need to decide how much they are willing to invest in the mental well-being of their workers and conduct a cost-benefit analysis. However, EAPs, even more customized programs with on-site services, have been shown to be cost-effective to employers through the years.

## Workplaces That Have EAPs

Workplaces That Have EAPs	
100%	Federal Employees
86%	State Employees
85-97%	Large Private Sector
68%	100-499 Employee Workplace
44%	51-99 Employee Workplace
27%	<50 Employee Workplace

Attridge, et al (2018)

### Are EAPs Effective?

While the research on the effectiveness of EAPs is limited, studies have found that employees' use of EAPs enhanced outcomes, specifically significant improvement in presenteeism, life satisfaction, functioning, and often absenteeism.<sup>1</sup> In one longitudinal, controlled study, EAP participants were more likely than non-EAP participants to see a reduction in anxiety and depression.<sup>2</sup> Another matched control study found that users of EAP services often reduced their absenteeism more quickly than non-EAP users experiencing similar challenges.<sup>3</sup> In another longitudinal study,<sup>4</sup> 86 percent of people who were suicidal when they engaged with their EAP were no longer suicidal at the 2-year follow-up. Researchers have concluded that, while not all EAPs are created equal, they often provide accessible services that are effective at improving employee mental health and well-being.

### Can EAPs Support Employers Facing Employee Suicide?

When it comes to the life-and-death issue of suicide, EAPs have the potential to provide evidence-based suicide prevention, intervention, and postvention services to employers. The EAPs' contribution to the comprehensive workplace suicide prevention strategy is essential, and many would benefit from annual state-of-the-art training in evidence-based methods of suicide risk formulation and treatment to help distressed employees get back on their feet.

Social workers, who provide the majority of EAP clinical services in the United States, often report having no formal training in suicide formulation, response, and recovery,<sup>5</sup> so annual continuing education on suicide intervention and suicide grief support is often helpful to providers. Once trustworthy and credentialed providers have been identified, they should be highlighted in the “suicide crisis” protocol, so that companies are not trying to do this legwork in the midst of a crisis.

“[When it comes to supporting someone in a suicide crisis] Where do we find counselors who know what to do?” Business leader, In-Depth-Interview

If one of the main messages in suicide prevention is “seek help,” we need to make sure the providers are confident and competent with best practices approaches to alleviating suicidal despair and getting people back on track to a life worth living. Thus, dedicated employers will evaluate and even challenge their EAP providers to demonstrate continuing education in the areas of suicide prevention, intervention, and postvention skills. In fact, some states are mandating that all mental health professionals, including licensed providers of EAP services, have some sort of ongoing training in suicide risk formulation and recovery.

Do Employees Know about the EAP and Its Benefit?

In addition to making sure the providers have the needed skills, companies need to make sure that their employees know when and how to access the care. Recently, the American Heart Association CEO Roundtable worked with experts in the behavioral health field to develop a white paper for employers, [Mental Health—A Workforce Crisis](#), which includes seven specific actions employers can take to improve the mental health of their employees.<sup>6</sup>

Dr. Jodi Frey, expert panelist for the report and internationally recognized expert in the EAP and broader behavioral health field, recommends that “employers need carefully consider their workplace’s needs when selecting an EAP, and then should work with their EAP as a strategic partner to develop programs and communications that encourage utilization of the program and continued evaluation to improve services over time.”

Employers who are mindful of their workers’ well-being will continually promote well-vetted and employer-backed resources throughout the career of the workers. Leadership testimonials of the efficacy of the resources after the leaders have used them for their own mental health would bring credibility to the resources and model appropriate self-care to the employees. Bringing the resources on-site to the workers (and not waiting until the workers stumble upon the resources) is another way to break through the barriers to care. The Employee Assistance Society for North American (EASNA) developed a guide, [Selecting and Strengthening Employee Assistance Programs: A Purchaser’s Guide](#), to help employers evaluate EAPs and determine appropriate vendors. The guide also can be used to help employers evaluate their current EAP and decide if needs are being met or if more attention to what services should be offered needs to be addressed.

## Are There Different Types of EAPs?

Much diversity exists in EAP structure and quality.<sup>7</sup> Some companies use internal EAPs, where providers are also employees of the company. This arrangement often provides the benefit of having an immediate resource that has a clear knowledge of the company and industry culture. Evaluation of internal EAPs have found increased utilization, customization, and supervisor referrals;<sup>8</sup> however, there are some drawbacks. Internal EAPs, because they are so closely connected to the company, run the risk of being perceived as having blurred lines of confidentiality and objectivity. By contrast, external EAPs are often more diverse and can respond 24/7 across a vast geography. Because of these benefits and consequences, many companies have moved to a hybrid model to get the best of both models.

Hybrid EAPs often have an internal employee to manage the EAP and to work with managers and employees on critical incident response, strategic planning, organizational change, and to provide on-site assessment and problem resolution. They can be an important ally for the employer to best understand the potential for an EAP and to help with an ongoing evaluation that EAP providers are effective in their response and offering high-quality services.<sup>9</sup>

EAPs are most effective when they understand the industry and organizational culture, have business acumen, and can adapt to changes in organizational structure.<sup>10</sup> Thus, employers seeking to find a “best fit” for their employees will interview mental health providers about their knowledge of the unique stressors and strengths on the industry. Some industries (e.g., emergency responders and aviation) have gone so far as to credential mental health providers as being “specialists” in their industry to avoid a mismatch.

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## 15 Questions To Ask To Strengthen the Mental Health Safety Net

Employers should remember they are the customers of their EAP, and they should do the due diligence of making sure they are getting the best benefit possible. Here are 15 questions employers should ask about their EAP to get the best services possible.

- What services does your EAP cover? Are these services available 24/7?
- Who answers the calls of the EAP, and how are they trained and supervised? What professional and educational preparation and certifications do they have? Are they licensed?
- How are counselors selected and trained? Are certain licenses and other credentials required to be a part of the EAP provider network?
- What types of training have EAP providers received? Specifically, when was the last time they received training in suicide risk formulation and treatment?
- How is your EAP reporting utilization? How does your workplace’s utilization rate compare to others in your industry, and what can be done by the EAP and by you as the employer to encourage more utilization?
- Do your employees know about your EAP services and how to access them?

- For those who have used the EAP, how satisfied were they with the services? Did the services have a positive impact on the problem for which they were seeking support?
- When employees completed EAP services, did the EAP follow up (or attempt to follow up) with the employee to make sure all needs were adequately met?
- How does your EAP interact with health plans? Are EAP providers also providers of outpatient mental health, and if not, are they well-versed in the benefits of employees to make effective and seamless referrals?
- How is your EAP measuring outcomes? Can they also provide you with a return-on-investment or other cost-benefit analysis?
- How is the EAP promoting “upstream” mental health efforts like prevention, resilience, positive psychology, and work-life integration?
- Are there general mental health screening or other wellness tools the EAP can offer the workers to help them understand and monitor their mental wellness? Does the organization also assess its own culture of system-level mental wellness?
- Does the EAP have experience serving clients in our industry? If yes, what are some recommendations that they have to improve how EAP services are promoted and offered at our workplace?
- Is the employer receiving regular reports (i.e., biannual or annual?) from the EAP on utilization, presenting problems, satisfaction, and other workplace outcomes?
- Does the EAP provide manager or human resources training on how best to support an employee experiencing a mental health or suicide crisis? Are there additional staff training on skills needed to identify and assist employees in distress?

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<sup>1</sup> Beulah Joseph, Arlene Walker, and Matthew Fuller-Tyszkiewicz, “[Evaluating the Effectiveness of Employee Assistance Programs: A Systematic Review](#),” *European Journal of Work and Organizational Psychology*, 2018; Jodi Jacobson Frey, John Pompe, David Sharar, Rachel Imboden, and Lauren Bloom, “[Experiences of Internal and Hybrid Employee Assistance Program Managers: Factors Associated with Successful, At-Risk, and Eliminated Programs](#),” *Journal of Workplace Behavioral Health*, February 7, 2018; Mark Attridge, David Sharar, Gregory DeLapp, and Barabara Veder, “[EAP Works: Global Results from 24,363 Counseling Cases with Pre-Post Data on the Workplace Outcome Suite® \(WOS\)](#),” *International Journal of Health and Productivity*, December 2018; Ana Nunes, Melissa Richmond, Fred Pampel, and Randi Wood, “The Effect of Employee Assistance Services on Reductions in Employee Absenteeism,” *Journal of Business and Psychology*, December 2018.

<sup>2</sup> Richmond, et al, 2016 Michelle Richmond, Fred Pampel, Randi Catrina Wood, and Ana Paula Negreiros Nunes, “[Impact of Employee Assistance Services on Depression, Anxiety, and Risky Alcohol Use: A Quasi-Experimental Study](#),” *Journal of Occupational and Environmental Medicine*, July 2016.

<sup>3</sup> Nunes.



<sup>4</sup> Mutsuhiro Nakao, Mariko Nishikitani, Satoru Shima, and Eiji Yano, “[A 2-year Cohort Study on the Impact of an Employee Assistance Programme \(EAP\) on Depression and Suicidal Thoughts in Male Japanese Workers](#),” *International Archives of Occupational and Environmental Health*, November 2007.

<sup>5</sup> Barry Feldman and Stacey Freedenthal, “[Social Work Education in Suicide Intervention and Prevention: An Unmet Need?](#),” *Suicide and Life-Threatening Behavior*, August 2006.; Jodi Jacobson, Laura Ting, Sara Sanders, and Donna Harrington, “[Prevalence of and Reactions to Fatal and Nonfatal Client Suicidal Behavior: A National Study of Mental Health Social Workers](#),” *Journal of Death and Dying*, November 1, 2004.

<sup>6</sup> [Mental health—A Workforce Crisis](#), Center for Workplace Health, American Heart Association, March 5, 2019.

<sup>7</sup> Jodi Jacobson Frey, Jodi Ichikawa, Paul Jongmin, and Kaoru Woo, “[Suicide Prevention Among Working-Aged Adults: The Role of EAPs in Three Countries](#),” presented at the International Employee Assistance Professionals Association, Annual Conference, Minneapolis, Minnesota, October 12, 2018.

<sup>8</sup> Jodi Jacobson Frey, John Pompe, David Sharar, Rachel Imboden, and Lauren Bloom, “[Experiences of Internal and Hybrid Employee Assistance Program Managers: Factors Associated with Successful, At-Risk, and Eliminated Programs](#),” *Journal of Workplace Behavioral Health*, February 7, 2018.

<sup>9</sup> *Ibid.*

<sup>10</sup> Frey, et al., “Experiences of Internal...”; Frey, et al., “Suicide Prevention Among...”

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