A Model for Evening and Weekend Treatment for Alcoholism in the Workplace

by
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Conceptual Framework

The kernel for the idea of the "Evening and Weekend Treatment Program" (E&WTP) originated in Boston where the author served as the administrator for several Employee Assistance Programs (EAPs). She perceived the need for a special evening and weekend alcoholism program due to six major concerns:

(1) *The individuality of alcohol cases*—The diversity and range of alcohol problems in the workplace demonstrated the inapplicability of a standard treatment program for all cases. The 28-day treatment was not necessary for everyone, yet once a week therapy with Alcoholics Anonymous (A.A.) was insufficient for some cases.

(2) *The unavailability of annual/sick leave*—Most employees with alcohol problems exhausted their annual or sick leave, preventing further in-patient treatment. Federal regulations made this especially difficult for government employees who had already used their advanced leave.

(3) *The question of re-entry*—The notable absence of an employee participating in the 28-day treatment led concerned coworkers to inquire about the nature of the absence and to offer their assistance. Such concern, although natural, threatened the confidentiality of the individual.

(4) *Insurance coverage*—The growing expense of the 28-day treatment programs, in addition to the likelihood of escalating costs in the future, concerned the insurance companies which provided employee coverage.

(5) *Children of single parents*—Even sophisticated treatment facilities did not provide accommodations for a mother or father and their children. The costly alternative of private arrangements for day-care services (28 days) posed difficulties for the single parent who needed treatment.

(6) *The interdependence of the EAPs and the treatment programs*—This led the treatment sector to depend on the EAPs for their referrals and, likewise, the EAPs to adjust their referrals and mech-

anisms to the treatment facilities. EAPs needed more opportunity to have their special needs considered by treatment facilities. For example, the unique role of the supervisor needed to be considered.

In acknowledging these concerns, the author conceived the development of a special "Evening and Weekend Treatment Alcoholism Program." She consulted with Dr. Joseph Pursch, the renowned psychiatrist in the treatment of alcoholism, who was supportive of the concept and suggested a six-month treatment period. The program would address the diverse needs of the working individual and allow the EAP to provide input into the treatment as to what these needs would be.

Program Design

The EAP at the Department of Health and Human Services (HHS), chosen as a model program for the Federal Government, included the development of special programs to address the diversity of alcohol, drug, and mental health problems in the workplace. Such special programs include the EAP model for Drug Abuse Treatment, the EAP for Senior Executive Service Members and the EAP for Field Employees.

The development of the conceptual framework already described led to the decision to explore the possibility of a special project in this area. The author directs the HHS program. Because of its special mandate, it was the appropriate EAP to launch such an effort. What followed was a quest to secure: (1) the financing system, (2) the proper location, (3) the necessary clients, and, (4) the appropriate treatment facility. Each of these items is described below.

(1) Meetings with Blue Cross and Blue Shield (BC/BS), in an effort to obtain insurance coverage for participation in the treatment program, spanned a two-year period. BC/BS expressed an interest, but would only provide coverage if the program was to be tested, and not if it was offered as an open-ended treatment or service. Since HHS recognized the importance and the necessity of a comprehensive evaluation system, the plans for the development and implementation of the E&WTP proceeded.

(2) The Assistant Secretary for Personnel Administration (ASPER) at HHS originally suggested the worksite as the ideal location for the E&WTP. Hospital rooms were not necessary and the offices and conference rooms, otherwise not utilized in the evenings, could be put into operation as a cost-saving alternative.

(3) To secure a sufficient number of participating employees, a meeting was planned with the Office of Personnel Mangement (OPM) which is responsible, as the overall personnel agency, for the entire Federal Government's EAP effort. In support of this program, OPM hosted several meetings to encourage the participation of other Federal agencies in the D.C. area.

(4) A panel composed of the Department of Defense (DOD), the Treasury Department, OPM, and HHS was formed to select the appropriate treatment facility from a host of interested parties. After meeting with several treatment facilities, Atlantic Counseling/Melwood Farm were selected to provide the service. In September, 1982, Fairfax Hospital assumed the treatment responsibilities due to corporation changes at Melwood. Child care is available through the HHS nursery. Special arrangements are made for a nursery school teacher to work in the evenings. The service is available for children up to 12.

Program Description

In April, 1982, an agreement was signed by HHS, Blue Cross and Blue Shield Federal Employee Program and Melwood Farm to specify the respective responsibilities of each agency. The agreement was based on the assumptions that (1) the project include at least 65 participants to provide sufficient data for a thorough evaluation process of eighteen months, and (2) the evaluation segment of the project be funded by HHS.

The comprehensive E&WTP is administered over a 26-week period to clients from diverse government agencies, the majority of whom are referred by the Federal EAP.

The E&WTP hours during the first month are on Monday through Friday from 5:30 p.m. to 9:30 p.m., with additional hours on Saturday from 9:00 a.m. to 1:00 p.m., and on Sunday from 1:00 p.m. to 5:00 p.m. After the first month, the client's treatment is scheduled on Tuesday, Friday and Saturday for the remainder of the program, reducing the weekly hours from 28 to 12. The program focuses on the goal of total abstinence from alcohol which is pursued through group therapy, family therapy, education, and Alcoholics Anonymous. The program schedule is designed to encourage the groups to deal with the immediate problems of the group members and to provide educational and other structural experiences.

A majority of the staff is composed of professionals with alcohol experience. The director of treatment is highly experienced and respected in the field of alcoholism. It was not difficult to obtain counselors in the evening, because it became an opportunity for extra employment; so the program has access to a variety of highly skilled practitioners.

Evaluation Questions

Development Associates is the consulting firm contracted by HHS to conduct its EAP evaluation. The three evaluation questions to be examined for the E&WTP are: (1) Does the program provide a cost-effective approach to treatment in terms of improving worker performance? (2) Does the evening and weekend strategy provide effective alcoholism treatment? (3) Does the evening and weekend treatment strategy provide a cost-effective treatment approach in terms of reducing over-all health care treatment costs?

The methods for assessing these three areas are described below.

(1) Supervisor job performance ratings, conducted at intake, at the completion of treatment, and six months after the completion of treatment, are the primary method used to assess the effects of the program regarding impact on job performance. The client is rated as exhibiting desirable and undesirable work traits (punctuality, absenteeism, accident rate, attentiveness, employee relationships) on a more-than-average, average, or less-than-average basis. Each of the three ratings, covering a period from three months before intake to six months after treatment completion, uses the same criteria to rate the work performance of the client.

(2) Treatment effects directly related to alcoholism recovery are primarily assessed in terms of successful completion of the six-month treatment program and continued abstinence from alcohol for six months following the completion of treatment. Observable traits of alcohol and drug-free behavior, regular attendance during treatment, and self-report measures obtained by client intake and follow-up interviews are also assessed in the E&WTP evaluation.

(3) The Blue Cross/Blue Shield Federal Employee Program assesses the treatment approach in terms of cost-effectiveness related to health care costs by analyzing the increase or decrease of such costs relative to the usage of HHS employee coverage for the E&WTP. The anticipated cost-effectiveness in terms of reduced personnel and health care costs can be assessed by a comparison of data for the E&WTP and a control group of Federal employees enrolled in the 28-day treatment program in 1980–1981. Relevant considerations include the relationship of the two groups in the number of health claims filed and the expense of health care before, during, and after treatment. The first results of the E&WTP evaluation have not yet been released.

The E&WTP, from its initial stages of the conceptual framework, represents an innovative approach to addressing and treating the alcohol problems which decrease the work productivity of the employee, the mental and physical health of the employee, and the cost-effectiveness of the employing organization. The evening and weekend hours, in addition to the convenience of the worksite setting and the

wide range of therapeutic strategies, provide a viable alternative which focuses on the individual needs and diversity of each client.

At this time, one-half the 65 needed clients have been referred into the program. Child care has not been utilized. This appears to be because most of the patients are over 40. There have been three drop-outs and the first group has successfully completed the program. An after-care program has been initiated. At this rate the project will be complete and the resulting data on effectiveness and cost reduction should be available within 18 months.

NCA Celebrity Golf Tournament Set

Gordon MacRae

The National Council on Alcoholism, Inc. (NCA) will hold its fourth Gordon MacRae Celebrity Golf Classic from Sunday, October 23 through Wednesday, October 26 at the Tropicana Hotel and Country Club, Las Vegas, Nevada.

The tournament is the only national sports event designed to raise funds to fight alcoholism. This year's proceeds will go to support NCA's Prevention and Education Programs for Youth.

The three-day tournament brings together golfers, celebrities, and supporters of NCA from all over the United States. It will be highlighted with an Awards Banquet and all-star show presented by the celebrities on Tuesday evening, October 25. Entertainer Gordon MacRae, who is the Honorary National Chairman of NCA, will host the show.

The Gordon MacRae Celebrity Golf Classic will be played in a "scramble" format with five-person teams. Three sets of tees will be used. Lowest handicapped players will hit from the back tees, average handicap players will hit from the regular tees, and high handicap players will hit from the front tees.

After all five players have hit, the team captain will select the best shot, and all five players will hit their second shot (or putt) from that position. Play continues in this manner until the ball is holed out.

Alcohol Awareness Hour

On Sunday, Oct. 23, a special Alcohol Awareness Hour will be conducted by Dr. Joseph R. Cruse and Mr. and Mrs. Del Sharbutt, co-originators of the nationally-known Alcohol Awareness Hour at the Eisenhower Medical Center in Rancho Mirage, California. Alcohol Awareness Hours provide well-known individuals with an opportunity to share their experiences and recovery from alcoholism with others.

Over the past few years, the Celebrity Golf Classic has attracted such celebrities as Mr. and Mrs. Gerald Ford, Bob Hope, Buzz Aldrin, Joe DiMaggio, Ryne Duren, Pancho Gonzalez, Robert Goulet, Buddy Hackett, Peter Lind Hayes, Mary Healy, Alan King, Telly Savalas, Doc Severensen, Jerry Vale, Bob Welch, and Joe Williams, among others.

The National Council on Alcoholism, Inc., founded in 1944, has programs in prevention and education, community services, labor/management, public information, and publications. In recent years, NCA has worked to bring special attention to drinking and driving in the teen-age population.

Registration information for the Celebrity Golf Classic is available from:

Tournament Coordinator
National Council on Alcoholism, Inc.
733 Third Avenue
New York, N.Y. 10017
(212) 986-4433, Ext. 460

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