

Report to the Work-Life Committee on Employee Assistance Programs

**Recommendations for Employee Assistance Services at the
University of Kentucky**

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Introduction

In an effort to attract and maintain a diverse and dynamic workforce, committed to making the University of Kentucky a “Top 20” public research institution, President Lee T. Todd Jr. authorized the creation of Work-Life Office and Advisory Council in 2004. The Council was charged with developing recommendations for enhancing the University’s work-life. With this in mind, the Work-Life Office conducted faculty and staff surveys, from October 2005 to February 2006 on work-life issues, identifying areas that would further promote a positive and supportive work environment.

One aspect of work/life is employee assistance (EA). A Council subcommittee on Employee Assistance retained the services of an EAP Consultant who made a site visit in early March 2007. The consultant conducted an assessment of UK’s existing programs, services, and related institutional infrastructures supporting the various work-life initiatives, including the current Employee Assistance Program (REFER).

This report outlines the findings from that assessment, offering recommendations on feasible directions for future action, based on interviews with key stakeholders and documents supplied by University personnel. Appendix A contains a participant list of interviewees comprised of University faculty, staff and administrators, along with the questions covered during the meetings.

Assessment of Current Status

1. Knowledge about, and a thorough understanding of what an EAP can offer the University community varies among stakeholders.

There is general awareness and agreement about the personal services aspects of EAP’s—whether assessment/referral, or short-term counseling in areas such as substance use disorders, mental health and relational issues, but the more contemporary functions of EAP are less clearly understood. These include the role of EAP as a management tool for supervisors, deans and directors, as a focal point for training in both personal and organizational wellbeing, as a collaborator in planning with other workplace programs, such as emergency services, or with the existing range of work-life programs.

A broader scope of EA *best practices* is described in The Employee Assistance Professionals Association’s (EAPA) Program Standards. This is the largest organization representing EA programs in business, industry and higher education.

“Today, EAP’s address not only alcohol and drug problems, but also emotional issues, depression, stress, relationships, marital problems, compulsive gambling, career issues, financial and legal concerns, child and elder care, health and wellness, critical incidents, [workplace] violence, and many other contemporary problems.”¹

¹ Addendum to *EAPA standards and professional guidelines for employee assistance programs*. P.2. www.eapassn.org/public/articles/utilization06

Whether the University decides to reconfigure its on-site *REFER* program, establish a new EAP, or vendor out services, the range of activities performed by today's EAP's has agency at both the organizational and individual level.

2. Most of the interviewees favor an on-site Employee Assistance Program.

There was almost complete unanimity for on-campus EA services. A vendor, willing to out-station an EAP counselor to the campus for a particular number of days each week might meet this need, although there seemed to be a preference for an EAP that is sponsored and administered by the University. Ensuring anonymity, confidentiality and professionalism, were the primary concerns if UK adopts an on-campus program.

3. *REFER*; the de-facto EAP, based in the Family Center, is an internship and training clinic for graduate Marriage and Family Therapy (MFT) students.

REFER is an employee counseling program, carved out of the Family Center, for the purpose of providing confidential employee assistance to individuals, couples and family members associated with the University. Funded primarily by an \$11,000.00 contract with UK Human Resources, *REFER* has a separate phone line from the main Family Center, and ostensibly is used by H/R and managers wishing to consult about a troubled employee, or by employees wishing to book appointments. *REFER* provides one free assessment session, and referrals to meet ongoing needs. In many instances the referral provided is to the Family Center. This clinic operates on a sliding fee scale and has few limits on the length of service available. Other EA services offered in the past include conducting workshops for employees, and provided critical incident de-briefings for units when requested.

The Family Center's primary mission is to make available an *in vivo* learning opportunity for Family Studies graduate students. *REFER*, as a training site most likely offers an excellent experience for students, all the while falling somewhat short of meeting basic practice standards adopted for programs in the employee assistance field.² Concerns were expressed about the under utilization of the *REFER* program by faculty, administrative staff and others. The two most often mentioned issues were: 1. the student driven service delivery model, and 2. the limited clinic hours.

UK is a 24/7 workplace with employees throughout the State of Kentucky. The University's EAP must be able to attend to these realities. Furthermore, student interns are generally unfamiliar with University personnel policies and procedures placing them at a disadvantage when attempting to deal with difficult work-related

² Employee Assistance Professionals Association, 2003 Edition. *EAPA standards and professional guidelines for employee assistance programs*. 4350 N. Fairfax Dr. Suite 410 Arlington, VA 22203

behaviors. Finally, a negative perception surrounding students' ability to maintain confidentiality, whether real or imagined, has created a reluctance to recommend employees seek help from this program.

The Center's current location is less than optimal for promoting privacy, but its proposed move to Scovell Hall, does not adequately address this issue either. Staff may end up feeling more uncomfortable with *REFER*'s proximity to Human Resources, and faculty may continue perceiving *REFER* as a "staff only" program and not something useful to them.

4. Currently, Work-Life programs, including EAP reside under the auspices of Executive Vice President for Finance and Administration as represented on a day-to-day basis by Human Resources.

The UK Human Resources Department is viewed as supportive, proactive, and forward thinking. It has championed work-life programs for all employees. The department's leadership role in initiating and sponsoring work-life, including EA is an asset in furthering EA planning. Generally speaking, university human resource departments are viewed by faculty as the exclusive domain of staff, having no particular import to them, except perhaps around health care and retirement issues. For the most part, faculty do not consider themselves "employees", choosing to remain distant from policies, procedure or programs under the direction of H/R. UK appears to be quite similar in this institutional dynamic.

For staff, and particularly for those staff having personal or on-the-job difficulties, or for supervisors, who are having problems managing staff situations, the self-referred use of the EAP will be dependent upon the program's perceived neutrality, and by its distance, not proximity to Human Resources. This is not to suggest that H/R and EAP aren't consulting, coordinating and collaborating on any given workplace problem. Thus, the vexing problem of where to have EAP report, and under whose leadership and auspices the program should reside, requires considerable deliberation.

A robust array of Work-Life programs is developing at UK and most of these report to Human Resources. A new EAP, if University administered, would fit nicely into this complement of work-life services, however it was observed that the Office of Work-Life is struggling with a similar perceived lack of institutional credibility and visibility among administrators and faculty, as a result of its affiliation with H/R. Some other potential auspices mentioned for both Work-Life and EAP include, The Office of the Provost, the Office of the President, or the Office for the Executive Vice President for Health Affairs. Any of these locations would elevate EAP and Work-Life in the mind of deans, directors and faculty, and would not preclude an on-going functional reporting relationship with H/R.

5. UK has many services and programs applicable to employee assistance. At present, effective coordination and communication is reportedly minimal. Certain programs primarily established to serve

students, yet purportedly available to staff and faculty are under utilized by these latter constituencies.

The panoply of programs addressing organizational as well as personal aspects of well being at UK include Women's Place, the Office of Disabilities, the Office of Institutional Equity and Equal Opportunity, Office of Academic Ombud Services, and the Legal Clinic in the Law School, yet most are seemingly focused on student needs, even though staff and faculty are referenced as potential consumers in most of these. Needless to say each office offers something of relevance to the entire UK community. Consequently, distinguishing the ways in which these services can be made available, accessible, and user friendly for all employees is critically important.

The limited coordination, cooperation and communication among and between these various program and other services, established specifically for faculty and staff, are notable concerns. At the present time, mechanisms for referring to and from programs appear to be absent. Natural linkages between on-campus entities can be built with the creation of an effective Employee Assistance Program.

- 6. Similar to the issue expressed in #5, policies governing academic workplace behavior are also intermingled with student life policies; take for example, the drug and alcohol policy appearing on the Registrar's Web page. On the flip side there are policies exclusively geared to employee conduct, such as the Hospital Fitness for Duty Policy.**

Staff and faculty responsibilities and remediation plans are, at present, co-mingled with student responsibilities and redress in a number of areas. Some of these include substance abuse, harassment, and disabilities. This fragmentation and co-mingling can confound attempts to develop policies specific to staff and faculty for which the EAP would play a role.

- 7. There are organizational risks for which EAP can provide useful interventions, but first these areas must be identified.**

Most of the key informants were unable to identify organizational issues that might be helped through EA. The focus of discussion was clearly on how, and in what ways, EA could help individuals rather than how EA might improve the organizational environment. This latter area is indeed an important aspect of EA work.

Some points of intervention might include departments with excessive work demands, or high disability or workers' compensation claims. The EAP can partner with related programs to develop means by which these and other organizational problems are positively influenced. Tackling departmental conflicts arising from perceived racial or gender inequities, or workplace disharmony emanating from faculty or staff substance misuse or abuse, are

organizational problems typically handled by an EAP. Departments where there is continual crisis management, high staff turnover, or tolerance for dysfunctional work relationships also find help from employee assistance consultation.

8. The mental health benefits are limited under the current UK health plans. Some plans require prior authorization in order to obtain the maximum benefit. Coverage is limited to 20 visits on all of the plans, and most require being seen by an in-network provider.

The UK Health Plans have limited behavioral health coverage. The brochure descriptions offer a somewhat confusing picture of co-pays, percentages, deductibles, and prior authorization to access mental health or substance abuse services. These provisions can deter individuals, already emotionally challenged, from using available behavioral health services.

An Employee Assistance Program can work toward simplifying access to these benefits by establishing relationships with plan administrators, and by working out arrangements that allow the EAP assessment to serve as the pre-authorization evaluation. EAP professionals often recommend outside practitioners for inclusion to panels when a gap in a practice area is identified. EA professional also work with non-network providers to negotiate fee reductions for University faculty and staff. Under the current EAP arrangement through *REFER*, these activities have not been undertaken.

Recommendations

Six essential recommendations are offered. The first recommendation has various subparts that detail critical issues in the establishment of a new UK's EAP.

1. Establish an on-site EAP sponsored, funded and staffed by the University. Add the EAP to the complement of existing services in the Office of Work-Life.

A professionally staffed and University administered EAP will provide UK with an infrastructure resource for all to access.

A. Consider an appropriate name for the program.

Overwhelmingly, universities across the country simply call these services *Employee Assistance Program*. This option is not recommended for UK primarily because of its history with its current EAP. A redefinition is needed. A name that will distinguish this new endeavor from what has come before.

Some alternative names found among University programs are listed below and have considerable desirability.

Faculty/Staff Assistance Program
Personal Assistance Program
Care Services for Faculty and Staff
Faculty and Staff Services

Staff/Faculty Counseling and Consultation
Faculty/Staff Assistance and Wellness Program
Faculty/Employee Assistance
(Name of) University Integrated Employee Assistance
Work-Life Connections-EAP
The Resource Center: Employee Assistance and Counseling
CONCERN: an Employee Assistance Program

B. Establish an Advisory Board

The purpose of an Advisory Board is to promote, market and function as a public relations arm for the program. This representative body provides input and guidance to the EAP manager or director. It assists with developing goals, direction, program design, implementation, collaboration, and evaluation. Advisory Board members need to act as program advocates for resources and sufficient ongoing funding to enable goal attainment.

The board needs to have representation from a cross section of the campus, including staff; faculty, retirees (if part of the constituency served), and membership should be rotating after a specified term with a proportion of the members replaced each year.

Membership might include the following:

1. Representative from the Provost Office or Council of Deans
2. Representative from Faculty Senate
3. Representative from Staff Senate
4. Representative from Family Studies, Psychology or Social Work
5. Representative from the Business or Law School
6. Representative from the Medical School or other health related field
7. Representative from either the Office of Disabilities or Office of Institutional Equity and Equal Opportunity
8. Representative from Campus Safety/Security/Police, or Disaster/Risk Management
9. Representative from the President's Commission on Diversity or President's Commission on Women
10. Representative from The Institute for Workplace Innovations

Ex-Officio Members:

1. Representative from Human Resources
2. Representative from Off Campus Programs

The existing EAP Subcommittee, or a newly appointed Advisory Board will want to create either an RFP, if services are to be outsourced, or a preliminary program plan. Funding should be identified and secured, along with a location. Establish an operating format for the Advisory Board and write a job description for the Director/Manager. Interview and select.

C. Develop a Mission Statement. This guides the activities of the EAP and provides a focus for the program.

An example of a mission statement: *UK is dedicated to supporting and enriching the lives of all those on which it depends. It is in the best interest of both the institution, and its faculty and staff to provide assistance when personal*

or workplace problems affect the performance and well being of our dedicated employees. For these reason UK established (Insert Name of Program) designed to:

1. Prevent personal and workplace problems from escalating.
2. Intervene as early as possible.
3. Provide assessments, interventions, and resources in a professional, time-limited manner.
4. Resolve and manage personal and work-related problems, whenever possible.

D. Develop a program design that meets the needs of the University community and its financial resources

Given the limited mental health and substance abuse benefits currently available through the various UK health plans, it is recommended that a 1- 5 session model for individuals, couples and families assessment and treatment be adopted. This approach would include referrals for protracted problems along with case management.

1. First Year: Additional design considerations

*Determine how eligibility will be defined:

Recommendation: Be as inclusive as possible, e.g. part-time and full time employees, visiting lecturers, full and part time tenured, non-tenured faculty, family members as defined as anyone living with the employee on an ongoing basis, or some similarly inclusive language. (Inclusion of Teaching Assistants and Retirees/Emeriti Faculty vary by university.) **Recommendation:** Include them.

*Establish Office location and hours:

Recommendation: Establish flexible hours, for example, opening one early morning and staying past normal closing time one evening a week. Establish a 24/7 emergency call system. Locate the EAP office so it is easily accessible, but not highly visible, or in a building where other offices functions might inhibit access.

*Confidentiality protocols:

Recommendation:

Establish a statement about how records and information are handled. This needs to be visible on all materials. Internal forms need to clearly state the limits of confidentiality.

*Types of Referral Accepted:

Recommendation:

Self and Supervisory referral are essential. Define each. Determine the types of referrals necessary to meet the goals UK establishes for the program. For example, *if a goal of the EAP is to reduce the number of drug and alcohol related personnel actions, then policies and procedures regarding drugs and alcohol will need to include mandatory referral procedures.* These will need to be defined and explained.

Examples of other referral types defined by various universities include:

- Mandatory Supervisory Referral.
- Critical Incident Referral.

Family Referral.
Co-worker Referral.

2. Other functional considerations during the first year:

- *Establishing EA services to off campus University employees
- *Create outreach and marketing campaigns
- *Develop training areas, workshops, other learning opportunities
- *Identify areas for collaboration and coordination
- *Establish internal linkages among and between various programs at UK, and similarly establish external linkages with community agencies, practitioners, health plans and other relevant resources
- *Review and revise, with appropriate offices and departments, workplace policies for inclusion of EAP services
- *Develop mechanisms for data collection and program evaluation
- *Design an effective method of departmental consultation
- *Identify trends and emerging needs currently unaddressed or inadequately addressed
- *Establish an informative and interactive Web Site.

3. Hypothetical Staffing and Budget for First Year

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|---|-------------|
| 1. Staffing: 1 FTE Manager or Director (Licensed in field of Practice) | \$ 70,000. |
| 1 FTE Licensed EA professional | \$ 55,000. |
| 1 FTE Office Manager | \$ 38,000. |
| F/B 30% | \$ 48,900. |
| Sub-total Wages and Benefits | \$ 211,900. |
| 2. Operating Expenses E.g. Materials, Supplies, Evaluation | \$ 15,000. |
| 3. In-Kind space and overhead | ----- |
| Total | \$ 226,900. |

Alternatively, EAP vendors base program costs on the number of employees X a base rate of between \$2.00-2.25 per month for a *comprehensive* service package as envisioned in these recommendations. A good estimate of cost if outsourcing EAP based on 14,000 *potential covered lives* would be between \$336,000. and \$378,000. per year.

E. Establish a means of serving off campus faculty and staff.

Gather data on need and any information on prior use of EAP services. Where possible estimate utilization and develop a strategy for addressing need. During the first year offer enhanced telephone assessments, web-based materials, multiple telephonic treatment contacts, and referrals. Investigate other methods of meeting needs.

2. Consider re-locating the Office of Work-Life.

The Office of Work-Life would be best served, and therefore better able to serve the University community if it were re-positioned and reporting to one of the

following offices identified by several key informants: The Office of the Provost, the Office of the President, or the Office of the Executive Vice President for Health Affairs. There was insufficient time to establish which of these might be the best alternative. This requires more extensive discussion and investigation.

EA and Work-Life programs in other universities predominately report up through Human Resources to administration and finance. However, several universities have other reporting arrangements. Several of these are listed below as examples.

Division of Occupational Health and Safety
Medical Campus
Office of Health and Safety
Vice President and Chief Executive Officer for University Behavioral
HealthCare

3. Review all personnel related policies for both staff and faculty, and identify areas in need of revision.

Evaluate all student program descriptions and procedures involving staff and faculty conduct and identify areas where changes might be advisable. Collaborate with related offices to begin a dialog on coordinating efforts. Updating policies and procedures can begin once the EAP program design and operational policies are established.

4. Continue funding of the Family Center as a primary referral source for ongoing personal therapies.

The Family Center offers a low cost, easily accessible treatment program for University employees willing to be seen there. The EAP can use it as a primary referral resource for those clients looking for such a service. This is a valuable resource that should not be lost.

5. Beginning with the program design, a simultaneous program evaluation plan should be created.

Developing goals, objectives, forms, procedures, etc. for the EAP with an evaluation strategy in mind, will ultimately make it easier to justify the program to funding sources, highlight areas in need of attention, document use, and offer evidence-based goal accomplishment. The Institute for Workplace Innovation has the expertise to develop such a strategy.

6. Retain technical assistance during the first year.

The University will most likely save staff time and money if technical assistance is available to the EAP Director, the Work-Life Director and the EAP Advisory Board. Having a knowledgeable consultant on retainer for the first year will ensure that the initial start-up will have the expertise of someone familiar with the field. Reviewing proposed policies and procedures, ask relevant questions, and offer informed suggestions will help the program move quickly to actual service delivery.

Appendix A

List of Individual Interviewed

1. Mr. Frank Butler, Executive V.P. for Finance and Administration
2. Dr. Michael Karpf, Executive V.P. for Health Affairs
3. Ms. Kay Hoffman, Ph. D. Dean, College of Social Work
4. Ms. Jody Ensman, Program Manager, Health and Wellness
5. Ms. Christy Giles, Director, Emergency Management Services
6. Ms. Patty Bender, Assistant Vice President Office of Institutional Equity and Equal Opportunity

- Mr. Jake Karnes, Director, Disability Resource Center
7. Ms. Kim Wilson, Associate VP Human Resources
Ms. Mary Ferlan, Operations Director Human Resources
 8. Ms. Heidi Anderson, Ph.D., Associate Provost for Faculty Affairs
 9. Ms. Laura Koppes, Ph.D., Director UK Work-Life
 10. Ms. Terri Kanatzer, Elder Care Coordinator
 11. Mr. Kay Bradford, PhD. Assistant Professor Family Studies/REFER Prog.
Mr. Roy Fogue, Ph.D. Associate Professor Family Studies
Ms. Claudia Heath, Ph.D. Interim Chair, Family Studies/REFER Prog.
Mr. Jason Whiting, Ph.D. Assistant Professor Family Studies
Mr. Robyn Mowerey, Director of Family Studies
 12. EAP Committee Members, including Dean David Johnson, Chair
 13. Members of the Work-Life Advisory Council
Members of the University Senate Council
 14. Ms. Sherri Murphy-Goins, Employee Relations Supervisor
Ms. Michele Bailey, Senior Employee Relations Specialist Human Resources
Ms. Whitney Cunningham, Employee Relations Specialist Human Resources
Mr. Mike Gay, Senior Employee Relations Specialist Human Resources
Mr. John Sampson, Human Resources Administrator
 15. Ms. Jennifer Swanberg, Ph.D. Executive Director Institute for Workplace Innovations

Employee Assistance (EA) Issues for Consideration

I am looking forward to meeting you and hearing your ideas about the kind of Employee Assistance Program (EAP) you think UK needs to develop.

Please consider your thoughts and position on the following issues. I want to make sure we address these points when I meet with you the beginning of next week.

Thank you.
Linda

1. What do you see as the mission for the University's EAP?

2. Describe your vision of the structure/function of the EAP.

*For example do you see the EAP as including programs designated broadly as work-life, or do you envision a work-life program as offering EA?

3. Do you think the EAP needs an Advisory Board, and if so, what functions should it perform, and who should be represented?

4. What are your thoughts on the EAP having an academic affiliation as a means of establishing credibility with faculty?

5. How would you recommend funding the EAP?

6. What are your thoughts on improving the coordination among all of the various faculty and staff work-life benefit services and programs currently available at UK?