



LINKING INDIVIDUAL AND ORGANIZATIONAL WELLNESS

Employee assistance programs (EAPs) have traditionally addressed employees' substance abuse and emotional problems only after they become disabling. Recently, however, EAPs have been abandoning this approach in favor of a more proactive, wellness-oriented model.

Since September 1983 the EAP at St. Joseph's Hospital & Medical Center, Paterson, NJ, has offered employees and their dependents confidential, professional assistance for personal, familial, and workplace problems. A 787-bed medical center with additional facilities in the New Jersey counties of Passaic, Essex, and Bergen, St. Joseph's has in recent years expanded the focus of its EAP to include preventive strategies that not only address individuals' problems but identify operational issues that affect employee well-being. This wellness orientation now complements the St. Joseph's EAP's continuing commitment to help employees in need of immediate assistance.

SHORT-TERM COUNSELING

For the wellness component to be effective, however, employees need to know they have access to care when they are in acute need. As is the case at many other organizations, increasing numbers of

*A Hospital's
Employee
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employees are turning to St. Joseph's for mental health services because they cannot afford them and their insurance will not pay for them.

To meet this growing population's needs, in

Summary In addition to intervening when workers have substance abuse or stress problems, many hospital employee assistance programs (EAPs) now include a wellness component that emphasizes prevention and organizational wholeness.

The EAP at St. Joseph's Hospital & Medical Center, Paterson, NJ, has taken a number of steps to improve its responsiveness to employees' needs and promote constructive organizational changes. To meet increasing requests for mental health services, St. Joseph's EAP implemented a short-term (up to 12 sessions) counseling program that focuses on problem-solving techniques.

The EAP has also used feedback from clients to address organizational issues. For example, a survey that revealed differences between managers' and employees' perceptions of managers' leadership skills has led St. Joseph's to consider development of further workshops to train managers on how to be more effective leaders. And in response to complaints from nurses about a lack of communication with physicians, St. Joseph's invested \$8,000 to implement nursing support groups and seminars to enhance nurse-physician collaboration. Additional EAP activities include consulting services for other corporations and help for employees in overcoming financial barriers to access to healthcare and social services.

As budgets tighten, effective marketing of EAPs will be essential to their continued growth. In particular, EAP administrators must learn how to document the strategic and financial benefits of their programs.



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1990 St. Joseph's implemented a short-term counseling program that focuses on problem-solving techniques. Traditional EAP counseling programs offer up to three assessment sessions, referral to appropriate sources of care, and follow-up. By contrast, the St. Joseph's program offers employees up to 12 counseling sessions.

As the need for services has grown, the EAP has increased its staff size from two to six persons. Utilization rates over the past four years indicate how important this service has become for St. Joseph's employees (see Table, p. 46).

ORGANIZATIONAL INTERVENTIONS

A basic assumption of the St. Joseph's EAP is that effective management of employee stress requires interventions at both the personal and the organizational level. When employees are frustrated with certain aspects of hospital operations, they often relate their frustration to EAP counselors. If a specific issue comes up consistently in counseling sessions, the EAP can bring the problem to the attention of senior managers and suggest possible changes and prevention strategies. The Figure on p. 47 illustrates the process.

Leadership One issue employees have raised frequently in counseling sessions is a desire for more effective workplace leadership. As a first step in addressing this issue, in 1992 St. Joseph's EAP and senior managers asked employees to rate their supervisors' leadership practices using the Leadership Practice Inventory (LPI).

Published by University Associates, Inc., San Diego, the LPI assesses leaders' ability to:

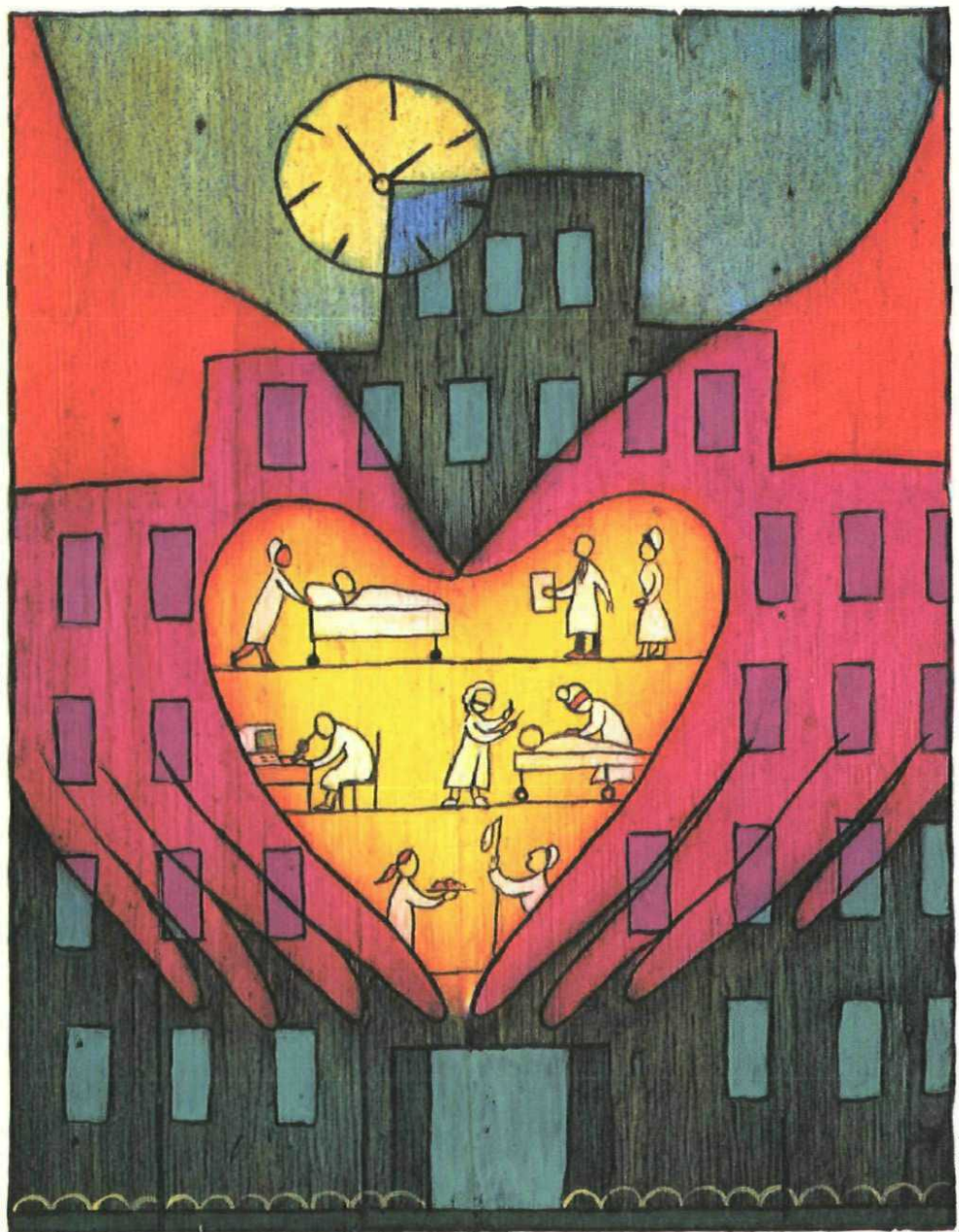
- Challenge and improve normal work processes (by searching for opportunities, experimenting, and taking risks)
- Inspire a shared vision (by envisioning the future and enlisting others in that vision)
- Enable others to act (by strengthening them and fostering collaboration)
- Model the way to more effective performance (by setting an

example and planning small wins)

- Encourage the heart (by recognizing contributions and celebrating accomplishments)

The inventory enables individual managers to identify important differences between their perceptions and those of their subordinates in these areas. It also makes it possible for the organization to isolate notable overall differences between managers' and subordinates' perceptions. Each manager was provided with individual feedback and given the opportunity for counseling.

As a group, St. Joseph's managers showed statistically significant differences from subordinates



Stefano Vitale



in the way they rated themselves in two areas: "Enabling Others to Act" and "Encouraging the Heart." The responses indicated that managers rated their leadership skills in these areas higher than their subordinates did. Based on these results, St. Joseph's will need to develop additional workshops to train managers on how to be more effective leaders in these areas.

Nurse-Physician Relations Between 1990 and 1992, the EAP received many complaints from nurses about the stress they experienced due to poor communications between nurses and physicians. Program managers documented these complaints and presented their findings to the presidents of nursing and medical affairs. In response, St. Joseph's invested \$8,000 to implement nursing support groups and seminars to enhance nurse-physician collaboration.

Of the 250 persons who participated in these events, 85 percent requested additional programs and encouraged formation of ongoing stress release groups. In addition, the medical education department recognizes the need to include the nurse-physician collaboration programs in its regular curriculum. Future EAP-sponsored nurse-physician events will promote ongoing use of behavioral measures to assess whether nurses and physicians are collaborating more effectively in daily operations. One way to measure the effectiveness of such collaboration would be to have the nurses and physicians involved define what constitutes collaboration and then employ a neutral party to observe physician-nurse interactions.

OTHER PROGRAMS

Consulting Services As staff gained experience with the EAP-wellness approach, they saw an opportunity to develop an external consulting program to generate revenue and enhance community relations. In the first year this service was available,

Program leaders are investigating methods of improving employee access to important social services.

the EAP entered into contracts with two medium-sized manufacturing firms, each with a multicultural employee population similar to that of St. Joseph's. Sales from these contracts and other miscellaneous services are projected to be \$40,000 in 1994.

One of the contracted companies has operations in Florida and New York. To ensure that the company's employees receive the benefit of a coordinated EAP approach, St. Joseph's has negotiated subcontracts with EAP providers from these other areas. St. Joseph's will use the experience it gained in setting up this arrangement to promote its EAP consulting services to other medium-sized multicultural organizations with facilities in multiple locations.

Organizational Catalyst Another objective of the St. Joseph's EAP is to continue to be a catalyst of organizational change by identifying unmet employee needs. The St. Joseph's EAP plans to sponsor research on social issues such as the need for child and elder care. Using their case experience, St. Joseph's EAP counselors can quantify the need for these social services and demonstrate how their availability would improve employee productivity.

St. Joseph's EAP is also taking immediate steps to serve employees. For example, program leaders are investigating methods of improving employee access to important social services. The EAP is developing closer links with not-for-profit agencies and other organizations that provide no-fee or low-fee services to help employees who may need long-term assistance.

EAP counselors have also found many private practitioners who are sensitive to clients' financial restraints. They will often agree to provide treatment after a candid discussion about the potential client's insurance coverage and ability to make copayments. EAP plans to update its data base regularly with information about practitioners and agencies willing to adjust fees to accommodate clients with limited financial resources.

Navigating Managed Care One last wellness objective for the St. Joseph's EAP is to help employees become educated consumers of the services of health maintenance organizations and preferred provider organizations. Finding access to high-quality, appropriate care is particularly important for managed care clients who require mental health and substance abuse services, where coverage may not be as extensive as in other areas.

MARKETING EAP TO MANAGEMENT

Although their ability to reduce workplace stress should be justification enough for EAPs' existence, from the boss's chair a more persuasive argument for implementing and expanding such

UTILIZATION OF EAP COUNSELING SERVICES: 1989-92

Year	Number of Individual Sessions	Number of Employees and Dependents
1989	779	218
1990	1,535	442
1991	2,638	682
1992	2,187	714



programs is one that links stress to poor organizational practices and financial loss. Making senior managers aware of the symptoms of organizational stress is a first step in advocating for some form of intervention and prevention (see **Box**, right).

To demonstrate their importance to organizational performance, in some cases EAPs may have to mount a sustained lobbying effort that includes low-key information gathering at the beginning. With the proper data and preparation, EAP personnel can craft proposals in terms of specific organizational goals and strategies to achieve them.

A good example of this process is the strategy the St. Joseph's EAP adopted to secure approval of an EAP-managed outpatient addiction program for employees of St. Joseph's and contracted organizations. A key element of the EAP's approach was to show senior managers how well such a service would fit in a managed care system. EAP leaders noted the benefits of early identification and on-site intervention, and they pointed out an outpatient addiction program would bring in new revenues through direct business with area corporations—a stated organizational goal.

The EAP also presented projected cost savings the program would bring by reducing employees' need for inpatient care. In marketing their program to senior managers, EAP leaders can point out that effective programs reduce absenteeism, accident rates, healthcare claims, disability and workers' compensation claims, disciplinary and grievance actions, turnover rates, and repeated hospitalizations from relapses related to addictive disease or substance abuse.

Many studies have documented actual savings to an organization as a result of a program's success in such areas. In 1988 the EAP at the St.

SYMPTOMS OF OCCUPATIONAL STRESS

- Inflated healthcare costs
- Increased sick leave
- Reduced productivity
- Accidents
- High disability payments
- Premature retirement
- Organizational breakdown
- Disloyalty
- Job dissatisfaction
- Poor decisions
- Antagonism between groups
- Thefts
- High turnover
- Increased errors
- Sabotage
- Damage and waste
- High replacement costs

By promoting employee well-being, EAPs can help an organization become more productive and focused.

Louis-based McDonnell Douglas Corporation spent \$1.3 million to treat 1,032 employees. Over three years, the investment is expected to yield \$5.1 million in savings—\$4.3 million in reduced medical claims and \$800,000 in reduced absenteeism (L. Stern, "Why EAP's Are Worth the Investment," *Business and Health*, May 1990, pp. 14-19). At the University of Michigan, an EAP reduced sick time by 55 percent for 60 percent of the university's 24,000 employees (K. Bruhnson, "EAP Evaluation and Cost Benefit Savings: A Case Example," *Health Values*, January-February 1989, pp. 39-42).

The St. Joseph's EAP has recently begun its own study of the effects of the program's interventions over the last three years. Study coordinators have randomly selected EAP clients to compare their absentee rates before and after intervention. The study will provide estimates of cost savings to St. Joseph's based on estimated costs of absences and actual dollars spent for medical services.

REASON TO ACT

EAPs that emphasize personal and organizational wellness (in addition to individual intervention) should appeal to Catholic healthcare providers for a number of reasons. By promoting employee well-being, they can help the organization become more productive and focused. Moreover, as programs mature and counselors and managers gain experience, a hospital can begin to make this valuable service available outside the facility.

But perhaps most important, implementation of an EAP is consistent with the values of Catholic employers. In creating such programs, facilities acknowledge the human dignity of their workers and honor their obligation to promote employee well-being. At a time when economic stresses lead many to avoid such responsibilities, Catholic employers must be more vigilant than ever in ensuring their employees have every opportunity to make a useful contribution to the social and economic life of their communities. □

EAP INTERVENTION PROCESS

