

Workplace Outcomes Among Local/Regional Employee Assistance Providers: **A Study of Effectiveness**

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WORKPLACE COLLABORATIVE “WOS” STUDY

ABSTRACT. The purpose of the study was to examine if the use of EAP services was associated with improved workplace effectiveness among employee clients in a consortium of local/regional EAP organizations known as the Workplace Collaborative (WC) over a one-year period in 2014 and 2015. Nine local/regional EAP vendors and their networks of affiliate EAP providers contributed a sample of 1,788 employee clients who had completed the validated Workplace Outcome Suite (WOS) 5-item measure both before use of the EAP and a 90-day follow-up period after EAP use. All five items showed statistically significant positive change, but the greatest amount of improvement was found for work absenteeism, work presenteeism, and life satisfaction with less sizable improvements for work engagement and workplace distress. These results offer evidence that local/regional EAP services can improve the workplace effectiveness of employees.

INTRODUCTION

This evaluation study examined self-report data from a large sample of 1,788 employee clients who used employee assistance program (EAP) services from one of nine different local/regional EAP provider firms who are organizational members of a membership association or consortium known as the WC. These nine EAP firms collected pre- and post-test measures of employee workplace performance amongst those employee clients who were employed by a customer organization and utilized EAP services. All of the local/regional vendors collected data using the same validated outcome measurement tool known as the Workplace Outcome Suite (WOS) 5-item measure, developed by Chestnut Global Partners (CGP). The data was “pooled” or aggregated across all of these WC members to provide a picture of the global workplace effects of EAP intervention for their collective book-of-business – mainly locally-based and small to mid-size employers who contracted for EAP services with one of the nine WC member firms.

The WC, established in 1994, is an invitation-only group of local/regional EAP firms that meet regularly to openly share ideas, work practices, results, and lessons. The WC includes 14 EAP firms from 14 different states and is represented by CEOs or Senior Leadership who have decision-making authority in their organization. A part of the understanding amongst the WC members is that EAP, like health care and politics, is practiced and delivered locally and there is no substitute for local decision-making and working alongside local employers. They have a strong sense of loyalty towards their communities and customers and believe they are better positioned to integrate with local work sites than some of the “mega” EAP firms. These nine EAP firms included:

1. Cascade Centers, Inc., Portland, Oregon
2. Cope, Inc., Washington, D.C.
3. Employee Assistance Network, Ashville, North Carolina
4. Frank Horton Associates, LLC, Raleigh, North Carolina
5. H&H Health Associates, St. Louis, Missouri
6. Human Development Company, Inc., Louisville, Kentucky
7. MKS Performance Solutions, LLC, Concord, New Hampshire
8. Southwest Employee Assistance Program, Inc., Little Rock, Arkansas
9. Workers Assistance Program, Austin, Texas

This study is an example of a research partnership between the WC and CGP’s Division of Commercial Science – where applied outcomes research and practice occurred in the same framework.

Measuring the Impact of EAP Services Using the Workplace Outcome Suite. The WOS, developed by scientists at the Division of Commercial Science, Chestnut Global Partners, is short, precise, and well-suited for pre-and post-test EAP studies. It uses a 1-5 Likert-type rating scale that examines various components of the effects of personal issues in relation to four aspects of workplace functioning and to overall life satisfaction. In addition to the commonly understood need for validity, reliability, and demonstrated psychometric properties, the WOS is able to detect change over time and has a manageable administrative and respondent burden¹. The WOS is copyrighted but can be used free of charge by EAP providers with the signing of a license agreement. Currently over 400 EAP providers have signed license agreements to use the WOS and the tool appears to be the best available outcome measure available to the EAP field. The measure can be downloaded online at www.eapresearch.com.

The original 25-item WOS was specifically designed for use in EAPs and contains five scales, each with five items that are popular and lie at the heart of understanding EAP effectiveness: absenteeism, presenteeism, work engagement, life satisfaction, and workplace distress¹. All measures other than the absenteeism scale are effect-indicator structures derived from classical psychometric theory. This simply means we essentially ask the same question in five different ways. The absenteeism scale uses a formative measurement model that captures how often the individual employee missed work due to personal concerns. This means we ask about absenteeism in five different ways one can be absent.

Two separate validation studies tested the reliability of the scales, the structural validity of the items, and the construct validity of the unit-weighted scale scores. The results of these studies support the use of the WOS to evaluate workplace effects of EAP and provide evidence that the WOS does indeed measure its intended set of five constructs¹. The WOS can assess individual differences that focus on workplace outcomes that are specifically relevant to EAP interventions and are likely to be sensitive to detecting change over time after the use of the EAP services. The WOS was validated using two separate modes of delivery: (1) counselor administered to subjects over the phone or in-person; (2) subject self-administered over the Internet or by paper and pen. Both modes worked equally well.

WOS Short Version. There is also a “super-short” 5-item version of the WOS that is simply a single item for each of the five constructs. It has undergone its own validation study and is comparable to the original 25-item. This validation study on the 5-item is currently under review for publication. The validation study indicates the short version works as sensitively as the full 25-item version. The 5-item version was used in this Workplace Collaborative study and is the first to feature findings for a large consortium of independent, local-regional EAP vendors based in numerous states throughout the country. The short WOS version can be seen in Figure 1.

Study Design. A repeated measures design was used in the study to examine possible changes over time in the five WOS items from before to after the use of EAP services. The method of data collection was embedded into the routine EAP initial assessment and follow-up processes at each WC member program and thus was not disruptive to the EAP clinical process or client experience. Employee clients were given the before or pre-test at the end of the initial intake call to set up an EAP appointment. The pre-test was administered by trained intake counselors at each WC member company’s access center.

A methodological advantage of the use of before and after data is that it allows for each person to serve as his or her own control for other factors (such as demographic and clinical characteristics). However, the study lacked a comparison group of other employees who had similar issues relevant to seeking EAP services but who had not used EAP services. This type of “pre-post” single-group study design is the “workhorse” of applied research evaluations in the field of EAP and other workplace health services. The design can generally identify if employees who used the EAP are improving at work, but it cannot necessarily explain why or demonstrate a cause and effect relationship between EAP use and work improvement.

Follow-up Period. A goal of the study was to see if an improvement in work performance after use of the EAP persists over time, so the post-test measure was not assessed immediately after the final EAP session. Instead, a three-month follow-up period was featured in this study to see if the intervention had a sustained impact over the approximate three month time frame. Although the various participating WC EAP organizations each reported to have conducted the follow-up at about 90 days after the last use of the EAP service for each case, the actual number of days after final EAP use at which the post-test was administered varied as some employee clients took longer to find. Each WC EAP organization designated a specific staff person to track employee clients and administer the post-test either by phone or sending an email link to the employee client to complete on his or her own.

Measures. Five items were used in this study (See Figure 1):

The Work Absenteeism item was assessed with the question: For the period of the past 30 days, please total the number of hours your personal concern caused you to miss work. Include complete eight-hour days and partial days when you came in late or left early. This item had an open response field to fill in a number of hours.

Each of the other four items had the instructions of: The following statements reflect what you may do or feel on the job or at home. Please indicate the degree to which you agree with each of the statements for the past 30 days.

Each item was rated on a 1-5 Likert-type rating scale, with 1 = Strongly Disagree, 2 = Somewhat Agrees, 3 = Neutral, 4 = Somewhat Agree, and 5 = Strongly Agree. These items were:

The Work Presenteeism item addressed decrements to productivity even though the employee was not physically absent but nonetheless was not working at his or her optimum due to unresolved personal problems (My personal problems kept me from concentrating on my work);

The Work Engagement item referred to the extent to which the employee was passionate about his or her job (I am often eager to get to the work site to start the day);

The Workplace Distress item looked at the employee feelings of distress about being at the work site (I dread going into work); and

The Life Satisfaction item addressed one's general sense of well-being (So far, my life seems to be going very well).

Participant Recruitment and Sample. Only the employee clients amongst WC EAP organizations (and not family members or dependents) were included in the study because of the interest in the relationship between EAP intervention and work performance for WC employer customers. The recruitment of participants involved inviting employees who accessed EAP to voluntarily complete the WOS evaluation from among the total number of employee EAP users at each WC EAP organization. Over 95% of employee clients agreed to participate and completed the pre-test at the conclusion

of the intake call. Employees were not offered an incentive to participate in the study and were allowed to drop out of the study at any time. The survey response rate, or employee clients who completed both the pre- and post-test over the one year study period is not known. Possible biases in the findings arise from a lack of random sampling and employee self-selection bias as all study participants could not be empirically examined with only pre-test data since as this study was a measure of change requiring at least two measurement periods. Also, since employee clients were first and foremost receiving professional helping services from WC EAP organizations rather than participating in a study, the follow-up protocol only allowed for up to three attempts to find employee clients by phone or email. WC EAP organizations did not want to come across as "irritating" or "nagging" the employee client to complete the post-test. The final study sample included 1,788 employee clients from across the United States in a diverse array of industries and occupational categories – a sample size that is well powered.

Data Preparation. Each of the WC EAP organizations submitted data with the responses for each employee client listed separately on a single line in an Excel® spreadsheet. This data was combined across all of the WC EAP organizations and location and then transferred as one aggregated dataset to the SPSS software program for statistical analysis. Preliminary descriptive analyses revealed a range across participants in WOS item scores at each time period.

Figure 1

WORKPLACE OUTCOME SUITE – 5 ITEM VERSION						
GENERAL INSTRUCTIONS						
Below is a series of statements that refer to aspects of your work and life experience that may be affected by the personal problems you want to address at the EAP during the past 30 days. Please read each item carefully and answer as accurately as you can.						
						NUMBER OF HOURS
AB	1.	For the period of the past 30 days, please total the number of hours your personal concern caused you to miss work. Include complete eight-hour days and partial days when you came in late or left early.				
INSTRUCTIONS FOR ITEMS 2 – 5						
The following statements reflect what you may do or feel on the job or at home. Please indicate the degree to which you agree with each of the statements for the past 30 days. Use the 1-5 response key to the right.						
			STRONGLY DISAGREE	SOMEWHAT DISAGREE	NEUTRAL	STRONGLY AGREE
PR	2.	My personal problems kept me from concentrating on my work.	1	2	3	4 5
WE	3.	I am often eager to get to the work site to start the day.	1	2	3	4 5
LS	4.	So far, my life seems to be going very well.	1	2	3	4 5
WD	5.	I dread going into work.	1	2	3	4 5
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Statistical Analyses. Frequencies of all five items responses were checked for bad or out-of-range data. Paired t-test analyses were performed to compare the Before EAP and After EAP mean scores to detect differences beyond chance levels for all items except absenteeism. The four items of presenteeism, work engagement, workplace distress, and life satisfaction were more normally distributed. Due to the skewness of the hours missed work for the absenteeism item, the pre- to post-test measure was analyzed using the non-parametric Wilcoxon rank test for related samples. With such a large sample size, the study had a high level of statistical power, which can make even a small difference between means to be found as statistically “significant.” Thus, a practical measure of the percentage change over time in each outcome measure was also created. This metric is the relative difference between the before and after mean scores for each measure. It was calculated by subtracting the After EAP mean score from the Before EAP mean score and then dividing this figure by the Before EAP mean score. The analyses were run using IBM SPSS version 22 for the total sample.

RESULTS

Tests showed a statistically significant change for all items (at the $p < .0001$ level). All changes were in the expected direction of showing an improvement following use of EAP services (See Table 1).

Table 1

Results for 5-item Workplace Outcome Suite Pre- and Post Use Scores - Workplace Collaborative December 2014							
WOS Scale	Pre-Score	Post Score	N	Raw Difference Score	t ^a	p-value	Difference Percentage
Absenteeism*	7.11	4.49	1,782	-2.62	-10.95	0.000	-37%
Presenteeism*	3.43	2.67	1,786	-0.76	-20.28	0.000	-22%
Work Engagement**	3.23	3.45	1,787	0.22	6.93	0.000	7%
Life Satisfaction**	3.08	3.74	1,788	0.66	21.22	0.000	21%
Workplace Distress*	2.38	2.09	1,788	-0.29	-9.06	0.000	-12%

*Lower scores are a better outcome. **Higher scores are a better outcome. Significant results are bold.

^aWilcoxon signed rank test used to test change in abstenteeism. The Z statistic is reported.

Absenteeism. The results revealed an average of 2.62 fewer hours of missed work due to personal problems in the past 30 days after EAP use compared to the past 30 days before EAP use. This result is a 37% reduction in work absenteeism hours.

Presenteeism. Employees also reported that their personal problems interfered less with their ability to concentrate at work after their use of the EAP. This result is a 22% decrease in the level of work presenteeism.

Work Engagement. After use of the EAP, employees on average reported a greater eagerness to get to the job site. This result is a 7% increase in level of work engagement.

Work Distress. After use of the EAP, employees on average reported feeling less dread about going to work. This result is a 12% decrease in the level of work distress.

Life Satisfaction. The change in level of life satisfaction was also positive, as more employees on average agreed that their life was going well after the EAP than before use of the EAP. This result is a 21% increase in life satisfaction.

Size of These Effects. Although all five of the WOS measures had significant changes, the size of the effects between the different items was not consistent. The largest sizes of improvements after EAP use were for work absenteeism, work presenteeism and life satisfaction. Thus, the ability to be at work when scheduled, to be productive when at work and to have an improved subjective sense about one’s quality-of-life were all rather large size changes experienced by the WC employee clients or users of EAP services.

CONCLUSION

Even though the exact kinds of EAP services examined in this study were not specified, these outcomes suggest that EAP intervention in a general or generic way are associated with improvements in all four workplace outcome areas and also in overall life satisfaction. Local-regional EAP services are highly heterogeneous and varied, along with the types and severities of problems that clients bring to the EAP – so it seems that despite the generic nature of EAP services there is sufficient intervention to produce a significant improvement in outcomes. To the corporate HR/benefits purchaser who is invested in using EAP as a work productivity enhancement, these results lend some credibility to the value proposition that a local or regional EAP vendor gets meaningful results. In the absence of a non-EAP user control group, this evaluation study cannot prove that the use of the EAP alone caused these improvements among the employees who used the service. However, it does demonstrate a statistically significant level of improvement after EAP use for all areas examined and a strong association with work improvements, with particularly large changes for absence and presenteeism. It is also important that these findings were obtained using a common and valid measurement tool with the data collected across many different states and urban/suburban/rural areas and providers of EAP services. Thus, the findings are likely to be reliable and representative of what most local or regional providers of employee assistance can deliver as improvements in workplace outcomes.

REFERENCES

[1] Lennox, R., Sharar, D., Schmitz, E., & Goehner, D. (2010). Development and validation of the Chestnut Global Partners Workplace Outcome Suite. *Journal of Workplace Behavioral Health*, 25(2), 107-131.



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