

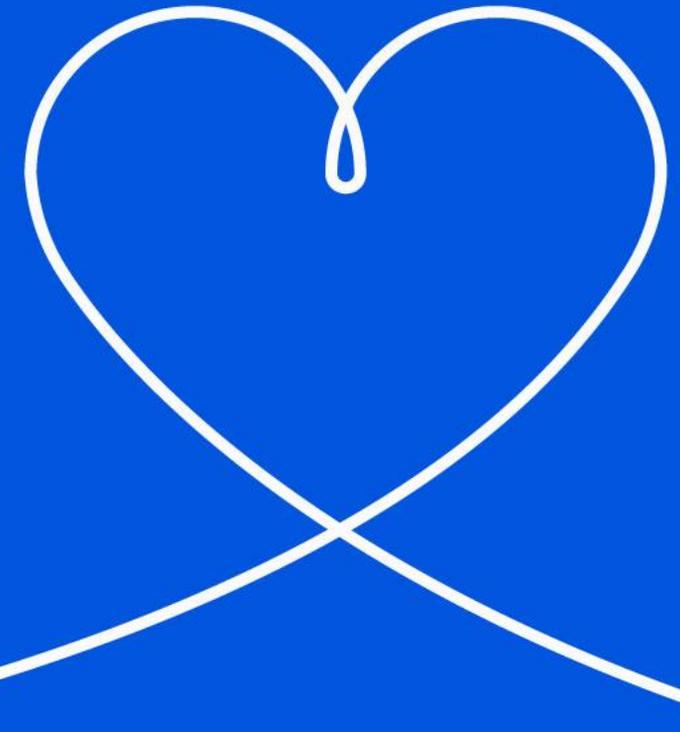
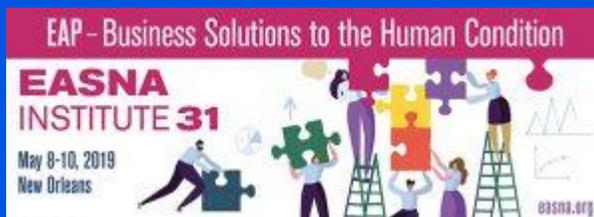


# Measuring Outcomes of Workplace Trauma Response

May 10, 2019 12:15 – 1:15

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# Critical Incident Response (CIR) in EAP settings

**“Today CIR is likely the most visible and appreciated EAP offering in the eyes of organizational leadership. EAP providers who fail to deliver highly responsive CIR are at risk of losing contracts.”**

(Pompe, 2017)

**“You guys (EAPs) are talking to the wrong people. You’re talking to HR and Procurement, when you need to be in front of the Risk Management team. Our organization could not operate without your CISD support!”**

•(SVP, Fortune 500 company, EASNA Institute, Chicago, 2015)

# Why should EAPs be concerned about measuring CIR outcomes?

Empirical research methods that address the effectiveness of EAP response to CIR events in the workplace were lacking.

## What is the Critical Incident Outcome Measure (CIOM)?

The CIOM is an evidence-based tool that builds on the earlier success of the Workplace Outcome Suite (WOS), developed by Chestnut Global Partners in 2010.

The CIOM tool is:

- scientifically validated and tested
- focused on workplace (not clinical) outcomes
- free with the signing of a license agreement (included)
- easy to administer

# Why measure CIR effectiveness?

- Movement in the CIR field over the last 5-10 years; towards a more resilient model of intervention
- Data mining study (University of Maryland) – dispels major concern that CIR events create potential to lead to PTSD
- Employers/consultants increasingly requesting data on effectiveness of CIR interventions
- EAP field trying to move towards evidence based practice

**“CIR is generally valued and appreciated but next to nothing is empirically known about actual workplace impact. The research that exists is mainly case studies and reviews of archival records. The time has come to build on our WOS success as a field and credibly demonstrate and quantify the positive workplace effects of CIR conducted by EAPs.”**

*(Sharar, 2017)*

# What is measured in the CIOM?

## Presenteeism

Evaluates is the level of employee distraction at work due to their reaction to a critical incident

## Emotional distress

Focuses on the level of distress that an employee may be experiencing after a critical incident

## Resiliency

Measures the ability of the employee to bounce back from adversity after a critical incident

## Return to work

Addresses the employees' ability to return to normal work tasks after a critical incident

# Basic psychometrics of CIOM

## Distributional sensitivity

All items cover the entire range of the scale and are not focused on only one area

## Structural validity

Confirmatory Factor Analysis (CFA) support structural validity of the scale, clusters are directed at intended factors

## Reliability

Scales have good alpha coefficients and their total scale exhibits acceptable levels of reliability

## Critical incident outcome measure – Questionnaire #1

### GENERAL INSTRUCTIONS

Below are a series of statements that refer to aspects of a recent critical incident or distressing event that occurred at work. Your Employee Assistance provider addressed this incident or event with your on-site service. Please read each item carefully and answer as accurately as you can.

### INSTRUCTIONS FOR VERSION 1

The following statements reflect what you may feel on the job or at home. Please indicate the degree to which you agree with each statement at this moment in time. Please use the 1-5 response keys to the right of this form.

		STRONGLY DISAGREE	SOMEWHAT DISAGREE	NEUTRAL	SOMEWHAT AGREE	STRONGLY AGREE
EMOTIONAL DISTRESS	1. I feel sad or anxious most of the time.	①	②	③	④	⑤
PRESENTEEISM	2. The incident keeps me from concentrating on work.	①	②	③	④	⑤
RESILIENCY	3. I believe I can grow in positive ways by dealing with difficult situations.	①	②	③	④	⑤
RETURN TO WORK	4. There shouldn't be any problem with me doing my regular work.	①	②	③	④	⑤

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## Critical incident outcome measure – Questionnaire #2

### GENERAL INSTRUCTIONS

Now after the completion of your session with your Employee Assistance Provider, we are asking you to fill out this second form.

### INSTRUCTIONS FOR VERSION 2

These statements may seem familiar to the earlier ones you filled out today. But now we are asking you as best as possible to *think about the 30 days before the incident occurred and how you felt and were functioning*. Again, please use the 1-5 response keys to the right of this form.

		STRONGLY DISAGREE	SOMEWHAT DISAGREE	NEUTRAL	SOMEWHAT AGREE	STRONGLY AGREE
EMOTIONAL DISTRESS	1. I felt sad or anxious most of the time.	①	②	③	④	⑤
PRESENTEEISM	2. I have had trouble concentrating at work.	①	②	③	④	⑤
RESILIENCY	3. I believe I can grow in positive ways by dealing with difficult situations.	①	②	③	④	⑤
RETURN TO WORK	4. I feel that I can perform my work without any problems	①	②	③	④	⑤

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## Critical incident outcome questionnaire #3

### GENERAL INSTRUCTIONS

About a month ago, there was an incident at your workplace. Employee Assistance providers came in and provided a supportive session that you attended. We would like to check back in with you to see how you are doing at this point in time.

### INSTRUCTIONS FOR QUESTIONNAIRE 3

The following statements are similar yet slightly different than the ones you responded to a month ago post-session with the Employee Assistance providers. Would you please answer as honestly as possible how you are doing in general by responding to these questions using the 1-5 scale at the right of this form.

		STRONGLY DISAGREE	SOMEWHAT DISAGREE	NEUTRAL	SOMEWHAT AGREE	STRONGLY AGREE
EMOTIONAL DISTRESS	1. I feel sad or anxious most of the time.	①	②	③	④	⑤
PRESENTEEISM	2. The incident keeps me from concentrating on work.	①	②	③	④	⑤
RESILIENCY	3. I believe I can grow in positive ways by dealing with difficult situations.	①	②	③	④	⑤
RETURN TO WORK	4. There shouldn't be any problem with me doing my regular work.	①	②	③	④	⑤

# Survey questionnaire flow

<b>Questionnaire #1</b>	<b>Administered at the beginning of the session to gather baseline information</b>
<b>Questionnaire #2</b>	<b>Administered at the end of the session</b>
<b>Questionnaire #3</b>	<b>Administered via email 30 days after the session for a longitudinal measure</b>

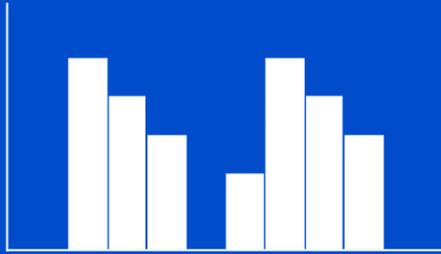
# Learning lessons

- Market response to “Perception of leadership” question - customers did not want this question included
- The tool was consequently adjusted to remove the question

Perception of leadership					
5. On a scale from 1-5, with 1 being adequate and 5 being superior, how would you rate the effectiveness of your leadership's reaction to the incident?	①	②	③	④	⑤

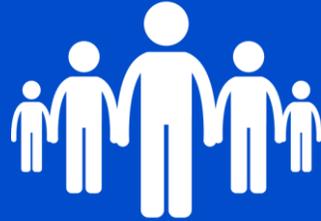
- Needed to establish internal alignment between Operations and Customer Service Managers (CSMs)
- CSMs needed to vet the program with their clients before implementation could begin

# Pilot project



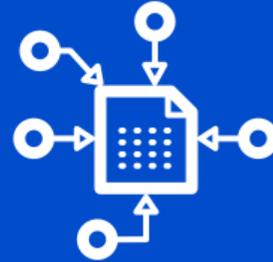
2016

- DRAFT Measurement Tool – Spring/Summer 2016
- Process of IRB Approval & Details of Initial Testing – Fall 2016



2017

- BETA Test Process – Winter/Spring 2017
- Adjustments to Critical Outcome Measurement Tool – Summer 2017
- Publish Validation Paper – Summer/Fall 2017



2018

- Collected internal customer and Account Management feedback around implementation
- Created implementation plan



2019

- Program implementation began

# Recent and upcoming publications

***EAP Works: Global Results from 24,363 Counseling Cases with Pre-Post Data on the Workplace Outcome Suite® (WOS)*** Mark Attridge, PhD, MA; David Sharar, Ph.D; Gregory DeLapp, MHS, CEAP; Barbara Veder, MSW, RSW. International Journal of Health & Productivity - Special Edition • December 2018 • Volume 10, Number 2 [http://www.ihpm.org/pdf/IJHP\\_V10N2\\_2018.pdf](http://www.ihpm.org/pdf/IJHP_V10N2_2018.pdf)

***Risk Management Approach to Analyzing Outcomes from EAP Counseling: Part 1 of Series with WOS Global Data*** \*

***ROI for EAP Counseling from Absenteeism and Presenteeism Work Outcomes: Part 2 of Series with WOS Global Data*** \*

***Lessons Learned from EAPs Using the Workplace Outcome Suite for Counseling: Part 3 of Series with WOS Global Data)*** \*

\* Mark Attridge, PhD, MA, Dave Sharar, PhD, Barb Veder, MA, and Ivan Steenstra, PhD  
To be published in upcoming editions of EASNA Research Notes

***Workplace Well-being: A Summary of the 2018 Workplace Outcome Suite Annual Report*** – to be released mid-May 2019 <https://join.lifeworks.com/workplace-well-being-summary/>



## Ivan Steenstra, PhD

Manager Research & Analytics, Morneau Shepell

Epidemiologist and human movement scientist, obtained his PhD from the Department of Public & Occupational Health at VU University, Amsterdam. The focus of his study and research is on work and health in general and the prevention of work disability in particular. He has (co-) authored over 40 peer reviewed publications, ranging from predictive modelling studies and systematic reviews to randomized controlled trials and presented at numerous (international) conferences.

# Get involved

For further information, or to join the CIOM initiative, please contact

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**Thank you**