

## Workplace Disaster Preparedness and Response: The Employee Assistance Program Continuum of Services

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**ABSTRACT:** *Response programs for workplace critical and traumatic events are becoming an acknowledged and sought after standard of care. The current trauma literature recognizes what goes on in the workplace between the Employee Assistance Program (EAP) and management. The authors have taken this intra-organizational relationship, assimilated the information, and developed a model that recognizes and supports management throughout the continuum of response to workplace traumatic events. The model recognizes the EAP as an important workplace resource and tool in management's ability to strike the balance of managing the workforce while assisting in recovery following workplace trauma. The introduced concept defines the continuum and highlights the before, during, and after phases, showing how EAP supports management in most effectively doing their job. [International Journal of Emergency Mental Health, 2005, 7(3), pp. 169-178].*

**KEY WORDS:** *Employee Assistance Program (EAP); Critical Incident Response – Continuum of Services; critical incident management; critical incident stress debriefing; resilience; stress hardening; workplace traumatic incident; crisis management consultation, management response*

Traumatic and disastrous events occur continuously around the world, in our communities, and in our workplaces. The focus of this paper is on traumatic events in the workplace and a response protocol known as the Employee As-

sistance Program *Critical Incident Response - Continuum of Services*, hereinafter referred to as the *Continuum*.

Employee Assistance Professionals (EA professionals) are workplace consultants, serving as an important component of the work organization's response protocol to traumatic incidents. The well-positioned and well-functioning Employee Assistance Program (EAP) is the nexus of appropriate management assistance, serving employees to mitigate the stress reaction.

The field of traumatic incident response and workplace trauma literature recognizes the need to address the human response to traumatic events. What form this intervention should take has been a topic of controversy in many venues, leading to some business organizations questioning the efficacy of interventions in response to workplace incidents. The focus of the controversy has centered on a single intervention: Critical Incident Stress Debriefing (CISD). The effect of the arguments has led to questioning for those attempting to help employees who have been traumatized by events and hindering appropriate response for fear of "hurting" rather

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than “helping.” There is a plethora of information published by both sides of the controversy, one side saying CISD may not be helpful and in fact may be harmful (Rose, Bisson, & Wessely, 2002; van Emmerik, Kamphuis, Hulsbosch, & Emmelkamp, 2002; Vedantam 2002); and the other side maintaining that CISDs, when done appropriately, are helpful (Everly & Boyle, 1999; Mitchell, 2003; Mitchell & Everly, 2001). Common ground in the controversy regarding the worth and value of the debriefings is a belief that there is a need to provide some form of assistance as early as is practicable following a traumatic event. Development and implementation of the EAP Continuum is divergent from the positions within the controversy currently being advocated.

For the purposes of this paper, the definition of a workplace traumatic or critical incident is an event that is sudden, unexpected, and of a magnitude that is beyond the norm of what usually happens to people at work, potentially overwhelming normal coping abilities. Such events could include but are not limited to rampaging at work by disgruntled employees; sudden deaths at work (including suicides, homicides, or natural causes); earthquakes, floods, explosions or other disasters damaging the worksite or affecting workers; shootings; and robberies. Traumatic events can have varying impact from one industry to another depending on the work and culture of the industry. For example, in the banking industry there may be specific training and preparation for predictable events such as bank robberies. Such targeted preparation, called “stress hardening” or “stress inoculation,” presented to a specific industry, such as banking, promotes resilience for banking employees if or when their bank is robbed. In organizations where robberies are not expected and preparation or stress hardening has not occurred, the impact can be more intense on the employees.

Workers have an expectation of safety in their workplaces and employers have a legal responsibility to keep the workplace safe. When traumatic events occur they can adversely affect employees, which can show up in behaviors such as increased absenteeism; reduced productivity; inability to focus, concentrate, or remember; increased errors; lowered morale; and generally disrupted work performance. All levels of workers can be affected, including management who has the dual role of managing the workplace as well as taking care of themselves. This may leave managers in a quandary as to prioritizing what comes first when traumatic events happen. Enlightened managers may call upon the EAP, as the

workplace experts on human dynamics, to assist them as they manage the workplace and help their employees.

EAPs are defined as “The work organization’s resource that utilizes specific core technologies to enhance employees and workplace effectiveness through prevention, identification and resolution of personal and productivity issues” (Employee Assistance Professionals Association, <http://eapassn.org/public/pages/index.cfm?pageid=507>). As such, the EAP uses a two-pronged approach working with management to accomplish the following:

- 1) Provide consultation and training for management to facilitate identifying, documenting, and attempting to correct an employee’s deteriorating job performance, inappropriate behaviors, and poor productivity. In addition to working with managers regarding individual employees, the EAP is also aligned with Human Resources (HR) perspectives and initiatives that work on behalf of the larger organization, i.e., utilizing EAP expertise on human dynamics in the workplace.
- 2) Work with employees to provide identification and assistance with resolution of personal problems that contribute to problems with job performance and productivity, through assessment, short-term problem resolution, and referral with follow-up.

EAPs typically provide a suite of services to the work organization including training activities, consultation in higher risk concerns such as violence prevention and threat assessment activities, grief and loss support services, coordination of independent medical evaluation or fitness for duty activities, and return to work or last chance agreement assistance. EAPs strive to be integrated into the culture of the organization and knowledgeable of the values of the group they serve. Therefore, EAPs are well positioned in the organization to respond to the acute mental health needs of those in post-trauma crisis.

The EAP model, or Continuum, described in this paper draws from the expertise of the many other existing models for crisis intervention and adapts them for the most appropriate workplace response. The goal and structure of the Continuum is designed to meet the needs of the workplace through services to management and employees. The Continuum was developed after the terrorist attacks on September 11, 2001, through a sub-committee of the Employee

Assistance Professionals Association's (EAPA) Professional Practices Committee.

EA professionals focus on maintaining an environment in which managers can effectively manage and the work organization is resilient in the face of trauma. The Continuum is such that participants (management, employees, and EAP) can and do enter and exit the Continuum at any point. The model clarifies and formalizes the process in writing by specifying and defining its steps. The model is a two-pronged approach to workplace response, addressing the needs of both management and employees, while remaining on two tracks that weave and intertwine throughout the process. Workplaces may be dealing with layer upon layer of stress, known as cumulative stress, in some cases unbeknownst to the employees themselves. Because the Continuum is a cycle rather than an isolated response, it deals with the cumulative stress in a proactive manner. Through an informal review of many EAPs conducted by the Washington State EAP in 1995, it was found that the majority of EA professionals have been trained to offer critical incident stress services through a variety of models including training offered by the International Critical Incident Stress Foundation (ICISF), Crisis Management International (CMI), the American Red Cross, and other organizations and individuals, but are effectively using approximately the same process as defined in this paper. The EAP Continuum takes the process of using these models and goes a step further by presenting a range of responses within a defined context, therefore acknowledging a beginning, middle, and end - leading to preparatory steps for the next workplace critical event. Further, the model focuses on the needs of the workplace, a focus that has not been clearly addressed by other models of critical incident response. The model supports the necessity for the work organization to manage the trauma as well as the workplace and provides for support from EAP. The EA professional serves as consultant and guide and delivers some of the activities including critical incident stress debriefings, identification of other expert resources as needed, and management of only the process, while empowering management to manage their workplace.

The model (see Figure A) provides for a multiple component system that spans the time spectrum of crisis events and respects a natural restorative mechanism that can be interfered with by premature or overly aggressive crisis intervention following the occurrence of a critical event. It also speaks to the necessity of assuring a qualified professional conducting the proper activity with the Continuum of ser-

vices available. In the workplace, the model does not medicalize normal human reactions to traumatic stress but rather offers solid and appropriate guidance supporting and working through the human side of crisis.

The following section will outline each of the critical components of the model, in order of *Before*, *During*, and *After*.

### *Before*

Before the event and in anticipation that today's workers will at some time in their career experience or witness a trauma in the workplace, the workplace prepares. With regard to contingency planning, EAPs support the work organization but do not carry the liability or the responsibility of the incident. EA professionals are continually alert to opportunities to provide strengthening services to the work organization in the event that a traumatic or critical incident should occur. Common entry points for the EAP at the *before* stage include risk assessment, policy development, management consultation, diversity awareness/training, stress hardening or stress inoculation, disaster preparedness, and internal and external collaboration with other individuals and organizations. Each of these will be briefly explained in the following section.


- *Risk Assessment* includes consultation with management regarding higher risk areas and groups of employees. For example, with an employee base charged with high risk work duties such as working directly with victims of violent crime, the EA professional may work more closely with management and/or the employees on stress reduction or stress hardening activities to help prevent some of the negative reactions to traumatic events. In some cases, this is specific to the mission of the particular workplace or work industry. For example, working in banks, law enforcement operations, hospitals, and schools would all have expected risks related to traumatic event exposure.
- *Policy Development* is a consultative area for EAPs assisting with policy writing and review, including, but not limited to, violence in the workplace, workplace critical incident management, and/or response protocols. Policies are significant for management because they guide management's response follow-

ing an incident and inform employees of what to expect. They can also clearly establish the role of the EAP before, during, and after a workplace traumatic event.

- *Management Consultation* is a recognized EAP strength. Providing consultative services to management, employees, and labor regarding high-risk be-

haviors or events, decreasing exposure to stressors, and increasing resilience are important workplace services for the EAP to offer. It is through consultation with management about a variety of workplace services that EAPs can assist in the higher risk workplace activities and most effectively empower management to do their job. As management consultations with the EAP typically deal with the higher

Figure A: EAP Critical Incident Response – Continuum of Services

 Employee Assistance Professionals Association

## Employee Assistance Programs (EAPs)



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risk behaviors in the workplace, these are very cost effective services provided by the EAP. They not only assist to mitigate high risk human behaviors but also decrease work organization liability should an event happen.

- *Diversity Awareness and Training* is educating and reminding the work organization that it is normal to see varying culturally different responses to traumatic events. Some of the more common ways people respond to traumatic events could be discussed as part of an EAP training on traumatic stress.
- *Stress Hardening or Stress Inoculation* constitutes pre-incident training which addresses supervisory critical incident stress training, training for managers in preparation and facilitation of management-led defusings, ongoing training - both formal and informal - regarding stress management, and a review of the services available directly or indirectly through the EAP.
- *Disaster Preparedness* constitutes assistance with disaster plans and helping the work organizations with the “nuts and bolts” or the specific protocol of disaster plans. The EA professional reminds the workplace that disaster preparedness includes practicing response protocols on a routine basis.
- *Internal and External Collaboration* is a core component and strength of the EAP. EAPs are recognized as the nexus of connecting the organization with outside expert resources if and when needed. This relationship is based on the specific need, not a continual relationship that forces the work organization to keep an on-going contract with other outside resources.
- *Trauma Debriefing* is a specialized technique that warrants additional training to be used safely and effectively. A debriefing is not employing a “counseling model” which is not indicated, nor is it appropriate to provide debriefings immediately following a workplace traumatic event. Many EA professionals have been trained in the appropriate models and timeframes to facilitate the continuum of debriefing and other supportive services.

### *During*

EAPs traditionally have a minimized role during the actual traumatic event because EAPs are typically not the first responders, such as are fire fighters, building security, or law enforcement officers. This is the time when basic needs such as food, water, shelter, and medicine are addressed. Once basic needs are addressed and safety is assured, the mental health needs can begin to emerge and be assessed. The important role of EAP in the *During* phase could include offering on-site response and assistance with the coordination of responses and respondents; collaboration with other responders; logistical and/or technical support; help in meeting peoples’ basic needs; consultation with management as appropriate; and help in stabilizing the situation and assessing symptoms and signs of distress.

### *After*

Post incident, the EAP role becomes more intensive and assists the workplace and management with proper response in an appropriate time frame. Unfortunately, this is often the most widely, and sometimes only, utilized EAP service following a workplace traumatic event. However, the Continuum describes appropriate roles for the EAP before, during, and after an incident. Use of the Continuum as presented in this article highlights the various roles of the EAP in the larger picture of preparation and response. The EAP is best used during the whole effort, not just to “clean-up” after an incident has occurred. During the *After* stage, the EA professional can make an assessment to recommend the organizational response. Responses immediately following an event may include the following:

- Crisis Intervention Services. Providing this service is most notably where EAPs have gained their recognition.
- Defusing. Management trained in this activity can conduct Management-led defusings, which occur after the incident. EAP can provide the training or coaching for management so they may be trained and empowered to provide the defusing to their workforce.
- Critical Incident Stress Debriefing (CISD; Mitchell & Everly, 2001). CISD is not therapy; it is an educational and supportive procedure with a built-in mechanism to identify and refer those individuals who may need further assistance or additional resources, including counseling. CISDs for employees typically occur in their

own affected employee group because their issues need to be debriefed at their level. The process provides for an appropriate venue in which employees are offered a chance to talk, diffuse, and normalize their feelings. The session or discussion, as it is often called in the workplace, is an opportunity to educate and normalize traumatic stress reactions, facilitate coping, increase awareness of adaptive and maladaptive behaviors, identify those employees who may be experiencing a more intense response and refer them for further assistance, and provide resources. EA professionals are adept at assisting management in identifying those employees involved in the incident (Jacobson, Paul, & Blum, 2005).

- **Management Support.** Debriefings for management are typically separate from debriefings for employees because management issues and responses can be different than those of the staff. Management still has the job of managing, yet they are also often impacted by the event while simultaneously having to manage an affected workforce. Debriefings for managers usually occur after the initial crisis has been resolved.
- **Crisis Management Consultation.** Crisis Management Consultation involves consulting with management and supporting their work with the affected work group. This is different than a debriefing for managers. The Crisis Management Consultation is a critical piece for EAPs because the managers are as affected as the employees, and managers may go into denial because they must stay strong for their workers. Consequently, managers often end up ignoring their own needs.
- **Assessment and Referral to Clinical Support Services.** The EAP can triage into clinical services as indicated.
- **Self-Care.** In order to effectively continue assisting the organization, the EA professional takes responsibility for his or her own self-care after critical events. The responsible EA professional assures that he or she has an appropriate support system either in his or her own EAP community or outside that community.
- **Business Continuity Consultation or Business Resumption Plan.** The work must go on. Often managers need assistance when balancing response to the impact of the event with the business resumption

needs. The day-to-day structure inherent in a workplace is essential to recovery because people operate better in a routine or predictable environment when their world is in the chaos of a posttraumatic event. The EA professional can guide and consult with management as the workplace stabilizes and business resumes.

### *Follow-Up*

It is important to review, critique, and evaluate with management the response to the event and the back-to-work routine after the event. Training to promote and support future management response, together with a focus on employee stress hardening, can be offered to the organization. The process is that management reviews their operational response with the EA professional present, evaluating the impact, response, and follow-up needs of the employees. Additional services the EAP can offer or facilitate following a workplace critical incident are described below.

- **Disaster Review Process and Procedures.** EA professionals can meet with management and discuss and review the notification, response, and predicted outcomes associated with the incident. This is one way to review the organization's overall response plan, including the timeliness of assessment and response, adequacy of resources, and impact to prepare for future traumatic events. Another popular activity is to conduct a 'lessons learned' session with the EAP and management, as well as any other key personnel who were involved with the disaster response.
- **Data Collection and Trend Analysis.** Information is gathered and analyzed to determine how well the response plan worked. Some EAPs gather information about symptoms manifested by impacted employees and provide this information in an aggregate report to management. This data would only be collected if the EA professional had previously informed the employee groups that general information regarding responses would be provided to management. By stating this during the pre-incident planning period, the EA professional is able to collect data and evaluate the overall impact while protecting individual employee's confidentiality.
- **Training.** Training regarding stress management may be indicated based on the follow-up analysis. If review of the data collection and trend analysis indi-

cates that a particular work group has experienced layer upon layer of multiple stressors, or cumulative trauma, additional training may include education regarding such issues as change management and resilience training.

- **Identification and Assistance or Referral.** This is offered for individual employees who may be experiencing a stronger or more intense reaction that could be due to previous traumas, serious life events, or other mental health concerns. Many employees have experienced trauma or serious life events prior to the workplace events and can benefit from referrals to more supportive services in the community.
- **Management Consultation.** The consultations with managers following a workplace traumatic event focus on offering managers support to effectively manage other organizational stress factors. This may incorporate assistance in increasing resilience and support to limit exposure to disruptive safety, environmental, and/or visual reminders of the acuity of the event.

The EA professional can assess throughout the Continuum which employees may need more intense ongoing help after the event and can assist management in referring employees to the EAP for ongoing support. This type of referral to the EAP requires a solid working relationship and trust between the EAP and management so that management can continue performing their jobs, while also identifying work performance concerns. The EA professional can assist managers as they manage affected workers and identify - through work performance and work behavior - those employees having continuing problems following the traumatic event. Further, EAP can be a support system for managers themselves as they go through their own personal recovery. To ignore the mental health needs of the employees can result in alienation from the work organization and eventual decline of employee work performance and job productivity. The work organization also could carry a certain amount of liability to create a plan and follow it when an employee is involved in a traumatic workplace event.

### *Response Review and Plan Revision*

Policies and procedures must be reviewed and updated, reemphasized, or revitalized as indicated. Employee behavior and productivity can be reviewed with a focus on observable changed employee behavior. Disaster plans can be revised to improve response to future crises, thereby moving the

work organization from a reactive to a more proactive approach. Liability is reduced when an organization prepares for an event and establishes an action plan. The action plan may include suggested new policy development, training, risk assessment, and research.

### **A Case Scenario – The Continuum in Action**

The following section provides a case example of how the Continuum worked in one particular work organization and in one specific workplace within that organization. This example has been used with permission from the workplace and all identifying information has been changed to protect confidentiality.

#### *During*

The case scenario begins in the “*During*” stage of the Continuum, because this is when the organization first contacted the EAP. In a large public organization, an employee killed another employee at work. Prior to the event, management had relatively limited contact with the EAP. Human Resource (HR) management recalled that they had an EAP and called right after calling the police. When the HR manager called the EAP, the police had not yet arrived at the site of the murder. The HR manager sounded frantic and uncertain of what to do and asked the EA professional if she could come to the worksite immediately, which the EA professional did. At this point, management was the “client” and they were expressing concern for how to best help their employees. At the same time they were personally traumatized because they knew both of the employees involved in the murder and couldn’t believe this had happened.

The EAP entered the Continuum with this organization at the “*during*” stage and provided basic assistance with on-site response and coordination of responses through consultation with the HR specialists. Discussion centered on what to tell the employees, establishing who needed to know what happened, what they needed to know, how they needed to know it, and when they needed to know. HR developed their plan through consultation with the EA professional. Discussion also focused on language to use when notifying employees, such as, “What I know and am able to tell you right now includes...” EAP’s role with management continued, and logistical and technical support was discussed as management decided which HR and supervisory personnel would provide information to different work groups, and how

much information could be provided at this time. The identified management group was an experienced group who were themselves personally traumatized by the event. Therefore, the basic EAP role consisted of listening, confirming, and supporting what management already knew they had to do. In this situation they appeared to need validation and reminders of basic things, such as the fact that they already had a written policy to guide their response. Other than the HR managers, the EAP had no additional contact with employees at this point.

### *After the Event*

A few hours after the initial EA response, the same management team requested EAP assistance when notifying the larger workgroup of the incident. The EA professional offered assistance to management by coaching them to do a Management-Led Defusing. The EA professional assisted them to effectively work with and provide leadership to their own employees. It is important that the EAP support management in doing their own job so that they are seen as in charge of their own staff and not just turning it over to the EAP. In this case, the EA professional provided coaching and consultation services, as well as traumatic stress handouts for HR management to distribute to employees. The EA professional was present while the employee defusing was conducted. Several days later a critical incident stress debriefing (CISD) was conducted by the EAP for the management team, followed by a separate debriefing for the affected employees. Having the management team precede the employees can facilitate the debriefing effort for the employees. Without management support, many employees are suspicious of the goal and process of debriefings. Management will also know what their employees will be going through and can then recommend the debriefing or discussion group to their employees. The debriefing was not a clinical or counseling session but rather an educational session to help mitigate the stress response and educate employees about traumatic stress reactions.

In this particular case, management had previously expressed concern to the EA professional regarding one of the employees in the affected work group. This employee had just experienced other stressful personal events prior to the workplace death. Two days later, this employee requested a private consultation with the EA professional and an assessment was conducted with a referral to the community for ongoing assistance. A week later another manager called the

EAP to consult about changed behavior in yet another employee. The EA professional encouraged the manager to refer the employee to the EAP for a confidential assessment; this was done. As the events unfolded, it became a good example illustrating management and EAP working together to support employees, with the EA professional constantly supporting and empowering management to do their managerial jobs. Business resumption was discussed with management as a way to support the employee's need for structure, predictability, and continuity, and as an antidote to further stress.

### *Follow-up*

The management team discussed what had happened, made a commitment to provide appropriate training to the staff, and work resumed. As business resumed some of the follow-up plan was implemented. Staff was reminded that EAP was available for personal consultations, and stress management training was implemented.

### *Response Review/Plan Revision/Before Contingency Planning*

An informal review of the response was conducted with HR and EAP. Safety and Violence in the Workplace policies were reviewed, and an enhanced procedure was put into place regarding workplace safety in the event of future violence in the workplace. Awareness of some policy deficits was noted and policies were strengthened.

Over the following year, this organization experienced several minor traumatic incidents and then experienced a sudden and unexpected workplace death of a long time and well loved employee.

### *The EAP was called again.*

Notice that the Continuum had now gone full cycle; and because it is conceived of as a "Continuum" it restarted when a new event occurred and management again called EAP. When the manager of this affected work group called the EAP, she had a better-defined and more-assured response plan because of the previous trauma response, follow-up, and subsequent training. The EAP entered the Continuum in the 'During' stage and moved into the 'After' stage more confidently and swiftly. The role of EAP remained consultation and support of management's response and the sup-



porting of management in doing their job. During the response and review, HR planned for and institutionalized EAP in the response protocol to assist with future traumatic events.

To this point, the authors have illustrated how EAP is an integral part of the Continuum. A parallel process is EAP's own preparation and integration into the workplace in order to provide highest level of services, including the work of the Continuum. In an article written by one of the authors (Paul, 2002), the groundwork was laid for EAPs to become more integrated into the work organization with regard to workplace disaster preparedness and response. Paul noted that a necessary foundation for any Critical Incident Management (CIM) program located in or coordinated by an EAP is the groundwork that must be performed before an incident happens. The following activities, gleaned from the experiences of EA professionals during and after the terrorist attacks on the United States on September 11, 2001, will help position an EAP to respond when a critical event of any scale occurs.

First, the EAP must define the population and culture of the workplace the EAP serves and the services provided to employees, management, unions, and family members. The EAP must differentiate the workplace from the community and the needs and resources of each. After defining the population, culture, needs, and resources, the EAP needs to work collaboratively with the workplace to identify what defines a crisis in need of a mobilized response. Questions that might help shape the definition of a crisis could include the following: Did the incident happen at work? Did it happen in the line of duty? Was it witnessed at work, or were the effects of the incident felt in the workplace? Was the workplace or workforce impacted emotionally, physically, or both? Remember that a widespread disaster can affect the workplace as well as the community, and the EAP is charged with working to sort out the impact on the workplace and make suggestions for the appropriate response. Of course, the workplace itself can define the event as critical.

The EAP needs to work continuously to assess internally both its physical and emotional capabilities. This includes knowing the limits to the EAP and when EA program staff may require additional support. The author manages an EAP that provided continual critical incident stress services to a large organization after a major earthquake. It quickly became evident that the EAP staff, themselves, were in need of support services and the EAP manager arranged for a debriefing of the EAP staff. Other supportive measures were also initiated, in-

cluding recognition for their work through incentives, such as a paid lunch. In process review, it was noted that the EAP should work with the larger surrounding community to link with external organizations and develop procedures to follow in selecting debriefers outside of the EAP organization when needed. This should be done before a trauma occurs to discern which debriefers should be utilized for which type of traumas; that the debriefer understands what she or he is being hired to do; and that the debriefer is part of the organization's and EAP's response, not an entity who is trying to get clients or patients for on-going treatment (Blum, 2002).

The EAP can work with management to assist in policy development by participating in the work organization's disaster response or preparedness team and helping establish a workplace disaster and violence policy. In addition to policy development, the EAP can play an important role in establishing and developing a crisis response plan that includes identification of a range of crises and responses. As part of that plan, the EAP can help to create a Critical Incident Management (CIM) team, or arrange for the contracting of response services, and to define the Continuum of CIM services to be offered to management as well as employees. In developing the crisis response plan, the EAP has an opportunity to collaborate with the executives, human resource professionals, risk managers, security, health, and wellness coordinators, and other sectors of the work organization. This type of collaboration further solidifies the critical role of the EAP with regards to crisis prevention and response.

The EAP needs to work continuously to establish and maintain norms and standards of best practice for defusings, crisis management consultations, debriefings, follow-up, and all other services provided within the Continuum of workplace critical incident response. Definitions of these services and the business case for ensuring the emotional well-being of the workplace should be clearly written in the crisis response plan, as should guidelines for partnering with federal, state, and local emergency management organizations and information regarding their response systems and support. Finally, the EAP should encourage the workplace to incorporate disaster response training into employee and management education programming. Management training on all levels should include definition of traumatic stress and workplace trauma, common stress reactions, factors associated with adaptation to trauma, self-care and stress management, and organizational (including EAP) response and recovery.

## Conclusion

The difference that the EAP Continuum brings is that the EAP stays at the workplace when the one-time debriefer or counselor departs after an incident is resolved. The astute EA professional can capitalize on this integration and provide more effective services to the workplace. This ongoing relationship can open the door to management's recognition that EAP is a valuable management resource not just to react to, but also to prepare and mitigate, the impact of trauma in the workplace. The EA professional continues to assess, consult, and train through the model and recommends assistance to the work organization, employees, and management. The EAP is present to offer follow-up services with those employees more intensely impacted by the event. The EAP consults with management regarding possible changed behaviors among employees, referral to EAP for assistance, assessment, and short-term counseling or referral for ongoing assistance as indicated and appropriate within the model of the EAP. The EAP remains in the workplace coaching and consulting with management and working with the affected employees identified through their job performance and behavior. The EAP is an important partner for the workplace that can support the organization's management of and response to traumatic incidents, helping to minimize harmful effects.

The Continuum is a unique workplace-based model that integrates Critical Incident Response services into an overall plan for worker well being, providing an organization with specific, implementable strategies for resuming productivity as quickly and effectively as possible. Further, the Continuum represents a solid underpinning for an effective Critical Incident Management program that is replicable, and that can incorporate new learning as it becomes available.

## REFERENCES

- Blum, D. (2002). *Selecting a debriefer*. Retrieved July 7, 2005, from <http://www.eapassn.org/public/pages/index.cfm?pageid=1>
- Everly, G. S. & Boyle, S. (1999). Critical incident stress debriefing (CISD): A meta-analysis. *International Journal of Emergency Mental Health*, 1, 165-168.
- Jacobson, J. M., Paul, J., & Blum, D. (2005). The EAP workplace critical incident continuum. *The Journal of Employee Assistance*, 32(2), 28-30.
- Mitchell, J. T. (2003). Crisis intervention and CISM: A research summary. Retrieved July 9, 2005, from [http://www.icisf.org/articles/cism\\_research\\_summary.pdf](http://www.icisf.org/articles/cism_research_summary.pdf).
- Mitchell, J. T., & Everly, G. S. (2001). *Critical incident stress debriefing: An operations manual for CISD, defusing, and other group crisis intervention services* (3<sup>rd</sup> ed.). Ellicott City, MD: Chevron.
- Paul, J. (2002). CISM services: Laying the groundwork for crisis response. *EAP Association Exchange*, 17.
- Rose, S., Bisson, J., & Wessely, S. (2002). Psychological debriefing for preventing posttraumatic stress disorder (PTSD). The Cochrane Library, Issue 1. Oxford, UK: Update Software.
- van Emmerik, A. A., Kamphuis, J. H., Hulsbosch, A. M., & Emmelkamp, P. M. (2002). Single session debriefing after psychological trauma: A meta-analysis. *Lancet*, 360(9335), 766-771.
- Vedantam, S. (2002, September 6). Debriefings don't help, and may harm. *Washington Post*, A12.