

The Council on Accreditation Employee Assistance Program Accreditation Process

Timothy J. Stockert, MBA, MSW<sup>1</sup>

**ABSTRACT:** The Council on Accreditation Employee Assistance Program accreditation process is time-limited and facilitative in nature. It is a distinct, step-by-step process that involves an internal and external review of an organization's policies, procedures, and practices based on standards of best practice. This article provides an overview of the steps in COA's EAP accreditation process from application to reaccreditation, and discusses several of the distinguishing features of the process.

**KEY WORDS:** Accreditation, Employee Assistance Programs, Accreditation Process

---

<sup>1</sup> Timothy J. Stockert, MBA, MSW, is Manager of EAP Services, Council on Accreditation, 120 Wall Street, 11<sup>th</sup> Floor, New York, NY 10005 (E-mail: [tstockert@coanet.org](mailto:tstockert@coanet.org)).

## **Introduction**

Although there are many different accrediting bodies in the world today for numerous types of services/programs, there are two principal accrediting organizations for Employee Assistance Programs (EAPs). The Council on Accreditation (COA) and The Rehabilitation Accreditation Commission (CARF) are the two primary accreditors of EAPs in North America. Both organizations have similar processes for accrediting EAPs that require pre-site submission of documentation and on-site review by volunteer peers. And, over the years, both organizations have refined, adapted, and altered their processes to meet the changing needs of the organizations they accredit. While COA and CARF have very similar processes, this article will focus on process information that is specific to EAPs seeking accreditation with COA.

## **COA's Facilitative Process**

COA describes itself as a “facilitative accreditor” meaning that it provides information and assistance to organizations throughout the accreditation process to help them interpret best practice standards and understand how these standards apply to the services they provide. COA is also facilitative in that it gives organizations multiple opportunities to show how they are complying with best practice standards (e.g., self-study, site visit, responses to reports, etc.), and additional time to implement processes that are not fully compliant with standards of best practice.

## **Timeframe**

In general, the timeframe for organizations to become accredited with COA is limited. New organizations seeking accreditation have two years to complete the process. Organizations seeking reaccreditation are notified eighteen months in advance of their expiration date so as to complete the process within this timeframe. The following information details the steps of the

COA accreditation process from application through accreditation, maintenance, and re-application and highlights differences, when they exist, for both new organizations and those seeking reaccreditation.

### **Determining Eligibility and Applying for Accreditation**

The first step in the accreditation process involves determining whether an organization is eligible. While an organization should conduct its own assessment, COA also determines eligibility for EAP accreditation at the time of application and bases its decision on a set of defined criteria that includes the following:

1. The organization must be an internal, external, or combined EAP and, at a minimum, provide the following core services:
  - a. Employee Education and Outreach;
  - b. Training to Supervisors, Managers, Human Resources, and Union Representatives;
  - c. Management/Supervisory Consultation;
  - d. Information and Referral, and Assessment and Referral Services; and
  - e. Follow-up Referrals.
2. The EAP must have provided services to clients/employees for six (6) months at the time of application;
3. The EAP must hold all required governmental licenses/certifications for its services; and
4. The EAP must be sufficiently autonomous and independent to permit its review as a distinct legal entity.

After determining eligibility, an EAP interested in becoming accredited for the first time using the *COA EAP Standards and Self-Study Manual, 2<sup>nd</sup> Edition* requests an application and submits information about the organization's services, finances, and operations.

Upon receipt of the application, COA sends the EAP a Financial Agreement that sets forth the accreditation fee. Once the signed Financial Agreement is received, COA sends the organization the *EAP Standards and Self-Study Manual, 2<sup>nd</sup> Edition* and instructs them to begin preparing their organization for accreditation.

### **Intake Call**

After the application phase, each EAP is assigned a designated COA Coordinator (Coordinator) – an expert in the standards and process – who will assist the organization in becoming accredited. During an initial intake call, the Coordinator discusses the accreditation process and standards, matches an organization's programs to COA's service sections, and finalizes a service plan that includes a timeline for the self-study submission and site visit.

Coordinators typically conduct a full assessment of an organization's needs to determine what type of assistance they may need. When applicable, Coordinators may recommend training to organizations that need additional assistance. Training is another way that COA seeks to help organizations and prepare them for the process. COA conducts ongoing training to cover information regarding:

- The content, format, and applicability of best practice standards;
- How to organize the self-study and prepare for the site visit;
- How to mobilize work groups and assign tasks with timelines;
- How to implement quality improvement mechanisms at all levels of the organization; and
- How to use standards to assess organizational readiness for accreditation.

Throughout the process, the Coordinator and EAP engage in frequent conversation to monitor progress and timely completion of the self-study document, to discuss and interpret standards, to discuss peer needs and plan for the site visit, and to prepare the presentation of any final materials to the Commission, COA's accreditation decision-making body.

### **Self-Study**

The self-study is a central component of COA's accreditation process and provides the first opportunity for an EAP to demonstrate compliance with the accreditation standards. The self-study is both a document and a process. As a document, it is a compilation of information from the organization (e.g., policies, procedures, minutes, training materials, etc.) that provides evidence of the EAP's compliance with the standards of best practice. As a process, the self-study is an opportunity for the EAP to engage in a course of self-assessment and work towards improving all operational functions including service delivery. The self-study process requires the participation and involvement of EAP staff, consumers, governing/advisory bodies, affiliates, and client companies, as applicable.

The self-study serves as the framework for the site visit process. Prior to the site visit, a Peer Review Team reviews information submitted with the self-study to determine compliance with the EAP accreditation standards.

Organizations typically take about six months to complete and turn in the self-study document to COA. COA expects an EAP to provide copies of its completed self-study to COA and to each of the members of the Peer Review Team at least eight weeks prior to the site visit so that there is adequate time to review the material.

While new organizations are required to submit pre-site documentation for all applicable standards, COA has recently redesigned the self-study phase of the process for organizations

being reaccredited so that fewer pre-site documents need to be submitted. Instead of resubmitting documentation, the CEO will certify that certain documents have not substantially changed since the last accreditation review. Some of these organizational documents include: Mission Statement, Bylaws, Grievance Procedures, Licenses, Certificates of Occupancy, Internal Accounting Procedures, Audit, and Insurance Policies. While the redesigned reaccreditation reduces the amount of pre-site evidence, organizations will still be responsible for the implementation of every applicable standard in the *EAP Standards and Self-Study Manual, 2<sup>nd</sup> Edition*.

### **Site Visit and Peer Review Team**

The site visit follows the self-study and serves as an additional opportunity to provide documentation of an EAP's compliance with the accreditation standards and to allow the review and observation of the EAP's records, services, and facilities. Like the self-study phase of the process, the site visit is facilitative in nature meaning that Peer Reviewers will work with the organization to determine whether they are in fact meeting the true intent of a standard. While an organization receives their site visit report within forty-five days of the review, generally they already know how they've been rated because of the facilitative communication that occurs between the Peer Review Team and EAP during the site visit. Compliance is measured standard-by-standard by the Peer Review Team. Pre-site documentation is reviewed prior to the site visit so that the team can get a general understanding of the organization's services and structure before conducting the on-site review.

A Peer Review Team is a group of two or more professional Peer Reviewers/Team Leaders, who meet COA's predetermined, written qualifications. Peer Reviewers and Team Leaders are individuals with extensive experience and expertise in the EAP field who undergo

training and supervision with COA to understand the standards as well as the process of accreditation and their role in that process.

The Peer Review Team always consists of at least two Peer Reviewers, one of which acts as the Team Leader. The size of the team depends upon the size and scope of the EAP being reviewed. In selecting a Peer Review Team, COA considers their background and expertise so as to complement the EAP's service mix and structure. In no case will a Peer Reviewer study an EAP when there is a conflict of interest. Peer Reviewers and EAPs are expected to notify COA of actual or apparent conflicts of interest, as soon as they are aware of their existence. COA reserves the right to make the final determination about Peer Reviewer assignment.

Once the Peer Review Team is finalized and approved, the Team Leader arranges a tentative site visit agenda, consulting directly with the EAP. The EAP is expected to accommodate all reasonable requests of the Team Leader.

Site visits span a minimum of one and half days. COA determines the site visit duration by considering the EAP's size, its services, and site and affiliate locations. COA reserves the right to extend the length of a site visit, if necessary to determine an EAP's compliance with COA's standards.

### **Preliminary Accreditation Report**

Immediately following the site visit, the Peer Review Team prepares the Preliminary Accreditation Report (PAR) and mails the report to COA. The Peer Review Team determines the PAR ratings by using COA's EAP Weighting System and rating methodology. Once the report is received, a senior staff member at COA presents it in a twice-weekly PAR Committee Meeting. Each and every PAR is reviewed and reported on to ensure consistency in ratings, the accuracy of ratings and comments, and to make recommendations to organizations regarding

how they can demonstrate compliance for those critical and mandatory standards that are still out of compliance. Within forty-five days of the site visit, COA sends the organization a copy of the PAR to allow further response before the Commission meeting. The EAP then takes the opportunity to respond in writing to the content of the PAR and submits a response to COA within forty-five business days.

### **Accreditation Commission**

The Accreditation Commission is COA's volunteer decision-making body that reviews PARs and EAP responses for purposes of reaching accreditation decisions. Collectively, the Accreditation Commissioners are professionals with extensive backgrounds in the EAP field. The Accreditation Commission reviews all documentation in a manner free from conflict of interest and without knowing the identity of the EAPs under review.

An EAP approved by the Commission receives a four-year accreditation. Once an EAP is approved, COA sends a notification letter and Final Accreditation Report (FAR). The notification letter identifies the specific services for which the EAP has received accreditation as well as the expiration date. The FAR is a comprehensive management report listing the ratings for all standards as well as comments from the Peer Review Team/Commission for non-mandatory and non-critical standards that are still rated out of compliance. Organizations are expected to work on and bring into compliance prior to their reaccreditation all of the non-mandatory, non-critical standards listed on their FAR. The FAR also includes information from the Peer Review Team regarding the organization's strengths. In addition to the notification letter and FAR, the organization receives a plaque and other information to publicize their accreditation.

Occasionally, the Commission will make one of the following decisions: probation, suspension, denial, or revocation. A decision of probation, suspension, denial, or revocation typically arises when COA is made aware of reliable information that raises a concern about stakeholder health and safety, a serious risk management issue, and/or the credibility of COA's accreditation process. Probation and denial decision are typically granted to new organizations while suspension and revocation occurs to organizations seeking reaccreditation.

An EAP can also be denied accreditation for any of the following reasons:

- The EAP does not meet the eligibility requirements for COA accreditation at the time of decision-making.
- The EAP submits self-study materials or information as part of the accreditation decision-making process that misrepresents the factual situation or is otherwise prepared dishonestly.
- The EAP fails to disclose information during the accreditation process that is or would have been germane to an accreditation decision.
- The unaccredited EAP holds itself out as accredited before formal notification by COA.

The Accreditation Commission also has the discretion to defer reaching an accreditation decision in order to allow the EAP to clarify its compliance with any standards with which the Accreditation Commission has questions. When the Commission defers a decision, they occasionally request that COA conduct a remedial site visit. More frequently, the organization is given between 3 and 9 months without a remedial site visit to correct any deficiencies and submit revised documentation showing implementation and compliance.

### **Maintenance of Accreditation**

During the four years that an EAP is accredited, COA requires the organization to maintain compliance with the EAP accreditation standards and to demonstrate continued compliance through completion of required reports, self-reporting of changes or events which could have an impact on continued compliance, and cooperation with any interim review processes, site visits, or external complaint review processes.

COA requires all accredited EAPs to complete a “Maintenance of Accreditation Report” annually. This document is a self-reporting device that appraises COA of incidents and occurrences as well as changes in services, structure, personnel, or funding or other factors that may raise questions about an EAP’s continued ability to comply with COA standards.

### **Reaccreditation**

Eighteen months in advance of an EAP’s accreditation expiration, COA notifies the EAP of their need to pursue reaccreditation. The reaccreditation of an EAP proceeds again from the agreement phase and all steps in the process remain the same except for the self-study phase.

### **Conclusion**

Because of the rigor of the EAP standards as well as the length and detailed work of the process, COA recognizes that providing ongoing facilitation is a crucial element in helping organizations achieve and maintain best practices.

There is no doubt in the EAP field today that having common, industry-wide standards of best practice is important. Yet it is the process of accreditation under those standards which truly distinguishes one EAP from another. An EAP that chooses to become accredited and achieves this distinction is choosing to commit itself to a thorough, ongoing process of external

examination and review as well as an internal process of organizational transformation and continuous quality improvement. This is the COA EAP accreditation process.

References

*The Council on Accreditation Policies and Procedures Manual*, Council on Accreditation: New York, NY, October 2001.

*The Employee Assistance Program Standards and Self-Study Manual, 2<sup>nd</sup> Edition*. Council on Accreditation: New York, NY, January 2003.

CARF The Rehabilitation Accreditation Commission. “Steps to Accreditation” [Online]. Available: <http://www.carf.org/consumer.aspx?content=content/Accreditation/Steps.htm>.