**NAME: SEAP GENERAL INFORMATION SESSION**

**AUDIENCE:** ALL EMPLOYEES (rank and file, supervisors, managers)

**TIME:** ONE AND ONE HALF HOURS (without video and activities/exercises)

TWO AND ONE HALF HOURS (with video and all activities/exercises)

# SESSION

**DESCRIPTION** This session is designed to:

* Familiarize employees with benefits available to them through the State Employee Assistance Program (SEAP)

**TRAINING** Large group interaction, lecture, small and large group

**METHODS** discussion, small group work, Power Point slides/overheads,

handouts, flip charts, video.

**TRAINING AIDS:** • Prepared note cards (used in Appendix 2 and Appendix 9)

* Blank note cards (used in Appendix 3)
* Blank flip charts or board (used in Appendix 5)
* Newspaper/magazine articles (used in Appendix 4)
* Executive Order 1996-13 (Appendix 7 – place in participants’ handout materials)
* Mental Health quiz (Appendix 8)
* Mental Health article (Appendix 8)
* SEAP video and video player
* Power point slides/handouts (slides may also be reproduced as overheads or flipcharts)
* SEAP brochures/wallet cards (place in participants’ handout materials)
* Props (optional). Suggestions include:
* Pictures of (or actual) items from 1950’s and 1990’s (e.g., telephone)
* Individually wrapped life savers
* Quotations to be posted around room (Appendix 10)

LEARNING

**OBJECTIVES: •** Be able to list the services available through SEAP.

* Demonstrate an understanding of who is eligible for SEAP benefits.
* Be able to articulate the process for accessing SEAP benefits.
* Be able to provide the definition of an impaired employee.
* Demonstrate a general understanding of the Commonwealth’s Substance Abuse Policy, Fitness for Duty requirements, and the Conditions of Continued Employment (COCE) process.
* Demonstrate a general understanding of confidentiality.
1. **ICEBREAKER (optional)**

Choose one of three icebreakers.

* 1. Human Scavenger Hunt. **Appendix 1**
1. SEAP Acronyms. **Appendix 2**
2. SEAP Knowledge Activity. **Appendix 3**
3. OBJECTIVES PP Slide 1
4. Will answer FAQ’s
	1. Cost.
	2. Confidentiality.
	3. Why use SEAP.
	4. Who is eligible.
	5. Services available.
	6. Accessing SEAP.
	7. How SEAP works. **Add issues, if**

 **Appendix 3 used**

* + - 1. Clarify understanding of SEAP program.
				1. **MOTIVATOR (optional)**

Choose one of three motivators.

Articles. **Appendix 4**

Issues Connection. **Appendix 5**

1. Visual Impact Exercise. **Appendix 6**
2. **SEAP VIDEO (optional) Placement also optional**
	1. Introduction to SEAP program.
	2. About real people and how services used.
	3. Watch for kinds of issues, and how SEAP helped.
3. **OVERVIEW OF SEAP**
	1. What is SEAP – how can you and your family benefit from . services.
	2. State Employee Assistance Program.  **PP Slide 2**
	3. Coordinated through OA with PEBTF and contractor.
	4. Current contractor is United Behavioral Health.
	5. Free service for Commonwealth employees, families,
	others with whom they have close relationships.
	6. Toll-free phone number, available 24/7. **PP Slide 3**
	7. Confidential access for referrals to variety of services.
	8. Intake Counselors are clinicians with at least Master’s degree.
	9. Will refer to licensed professionals in wide range of specialties,
	including legal and mediation services, financial counseling,
	substance abuse, family counseling, other areas.
4. **WHO IS ELIGIBLE FOR SERVICES?**
5. Mary Smith story.
6. Most Commonwealth employees. **PP Slide 4**
7. Immediate family members.
8. Other family members.
9. Definition of “family member” is broad.
10. If employee’s job performance is affected by someone
who lives with them or is related/close to them, employer’s
best interest is for person to be eligible for SEAP.
11. Significant other.
12. Adult child (married or unmarried) living outside
household. Residence not limited to PA.
13. Adult child living in household.
14. Other unrelated individuals living in household.
15. Retired state employees with PEBTF benefits.
16. Employee must be eligible for SEAP in order for others to
be eligible. **PP Slide 5**
17. Not eligible on leave without pay without benefits.
18. Not eligible if on suspension without benefits.
19. Not eligible after resignation or discharge.
20. UBH maintains listing of social security numbers of employees
eligible for SEAP.
21. Information comes from PEBTF and insurers.
22. Person calling should know employee’s social security
number.
23. Presumptive eligibility.
24. Contractor will assume employee is eligible, even if
social security number not on file.
25. When individual calls, says they are “family
member”, contractor will assume person is eligible,
will attempt to find employee if social security number
not known.
26. **WHY COMMONWEALTH OFFERS SEAP PP Slide 6**
	1. Began in 1980 as drug and alcohol (substance abuse)
	program. Significant enhancements made to program
	to cover many problems that affect employees’ lives
	and ability to function.
27. Fewer than 8% of calls are substance abuse concerns. **Ask class to guess**
28. More than 50% of calls are for psychological reasons. **Ask class for examples**
	* 1. Rest are other types of problems. **Ask class for examples**
			+ 1. Commonwealth recognizes that problems exist among
				employees in workforce, has developed program to help
				employees and supervisors resolve them.
				2. Commonwealth recognizes that supervisors not marital
				or substance abuse counselors, nor doctors or lawyers.

Some problems are in employee’s personal life. **PP Slide 7**

1. Employee can address problems through SEAP without
involving supervisor.
2. Employee can contact SEAP and get assistance without **PP Slide 8** workplace knowing.
3. Mary Smith story (continued).
4. Some problems affect workplace, and are noticed. **PP Slide 9**
5. SEAP can be partnership between Commonwealth,
managers, supervisors, unions, and employees
to help address problem.
6. Discipline may be avoided if employee seeks help when
problems first develop.
7. SEAP also available for critical incidents. **PP Slide 10**
8. Examples are death on the job, armed robbery, threat
by citizen who comes into workplace.
	1. 1998 and 1999 – SEAP assisted with 80 traumatic
	incidents.
	2. Liquor store robberies, PaDOT construction site
	accidents not unusual.
9. Following traumatic events, critical incident stress debriefing
(CISD) can assist employees return to normalcy at work.
and home.
10. Goal of today’s training is to provide SEAP information, encourage
its use.
11. Consider SEAP as resource available when problem arises.
12. Problems better resolved when confronted early.
13. Hold on to brochure.
	1. **IMPAIRED EMPLOYEES PP Slide 11**
14. Impairment begins when problems start to negatively
impact lives, or when ability to cope gives out.
15. Drinking may not be work-related problem until missed work
due to loss of license through DUI.
16. Stress shouldn’t cause “burned out” feeling or strained
relationships with co-workers.
17. When debt reaches point where can’t cover essentials,
need to ask for help.
18. Impairment can be due to just about anything, not just drugs **PP Slide 12**and alcohol.
	1. How has living changed in past 40 years, what **Show props**causes more stress. **Ask class for examples**
		1. Can see behavior/mood change, don’t know why **Record on flip chart**
		2. Don’t see someone’s life outside of work.
			1. Usually can cope with problems, resolve them.
			2. “Impaired” employee - down days outnumber good days
			**over a period of time**. Coping doesn’t deal with problems.
			3. As “down” period continues, will show in changes in behavior
			4. Name examples of impaired behavior **Ask class for examples
			 Record on flip chart**

# EXTENT OF PROBLEM IN THE WORKPLACE. PP Slide 13

1. Personal fallout.
	1. 15% of the population has emotional/mental health
	problems that could benefit from counseling.
		1. Everyone experiences some sadness, depression,
		anxiety or fear.
		2. Can usually prevail over these conditions.
		3. Too many conditions occurring at same time can
		lead to need for assistance.
		4. Mary Smith story (continued).
		5. Services of an employee assistance program can
		be lifesaver. **Throw lifesavers**
		6. Consumer Reports magazine report - 9 out of
		10 people feel better after help for mental health
		issues.
		7. Employee assistance program that is voluntary and
		off-site means employees can speak freely and
		confidentially.
		8. Trained EAP counselor can help employee find
		appropriate solutions to problems.
	2. Alcohol, drug usage, other compulsive destructive activities **PP Slide 14**is not solution.
		1. Substance use is temporary escape only.
		2. 10% of population is impaired by alcohol.
		3. 8% of the population is dependent upon drugs.
		4. 90% of persons who abuse alcohol are
		working people.
		5. Their use of alcohol impacts lives of at least 4 or 5
		people who are close to them.
		6. In most cases, employee’s work performance will decline.
		7. Mary Smith story (continued).
		8. Sooner employee becomes aware of substance abuse
		problem, greater the likelihood of recovery.
		9. What do believe success rate is? **Ask class**
		10. SEAP program has 65% success rate in helping people **PP Slide 15**
		with alcohol addiction. Success is higher when employee
		seeks help in early years of addiction.
		11. Substances on the job – cocaine, marijuana, alcohol **PP Slide 16**
		(CDL positives).
		12. Executive Order 1996-13, “Commonwealth of Pennsylvania’s
		Policy on Substance Abuse in the Workplace”, in handouts.
		13. Use of legal (prescription) drugs **PP Slide 17**
* Temporarily may enhance performance.
* Prolonged use will lead to declining performance.
* Prolonged use can lead to dependence.
1. Don’t ignore a substance use/abuse situation. Encourage
individual to contact SEAP.
	* + - 1. Fitness for duty is not just substance abuse.

Every employee must represent Commonwealth to best **PP Slide 18**
of ability. That means coming to work on time, awake,
alert, ready to perform the job in safe and competent
manner, and remaining that way until end of shift.

If employee found unfit to work that day, may face **PP Slide 19**
discipline, be sent home, may become part of SEAP
program, voluntarily or not.

Employee may be required to sign a COCE (“Condition of
Continued Employment) requiring SEAP to remain employed.

1. **MENTAL HEALTH QUIZ** **(optional)** **Appendix 8**
2. **EMPLOYER CONCERNS PP Slide 20**
	1. Impaired employee exacts cost on workplace.
		1. Impaired employee uses 3.5 times more sick leave
		than non-impaired employee.
		2. Our average sick leave usage per employee is \_\_\_\_ days.
		Impaired employee may be using \_\_\_\_ sick days per year.
		That is \_\_\_\_ day of sick leave per pay period!
		3. Impaired employee and/or impaired family member uses
		5.5 times more medical benefits than non-impaired family.
		4. Employer effectively loses 25% in wages due to impaired
		employees and decreased productivity.
		5. Impaired employees are 5 times more likely to file worker’s
		compensation claim.
		6. Impaired employee may face discipline. Costs of responding
		to grievances can be thousands of dollars.
3. There are approximately 81,000 Commonwealth employees, **PP Slide 21**
each represents an investment by Commonwealth. 20-year
employee of average salary and benefits is million-dollar
investment.
4. Commonwealth has economic motivation to support its employee
investment through an employee assistance program.
5. **BASIC QUESTIONS & ANSWERS ABOUT SEAP**
6. Fill in details.
7. Address three main concerns that keep people
from using SEAP.
8. Confidentiality.
9. What to expect.
10. Cost.
11. **SEAP PROGRAM STRUCTURE PP Slide 22**
	1. SEAP is assessment and referral service provided contractor
	not connected to Commonwealth.
	2. Office of Administration (OA-SEAP) oversees program,
	coordinates with SEAP Coordinators throughout agencies.
	3. Current contractor is United Behavioral Health (UBH.)
12. UBH is private business not connected to Commonwealth.
13. UBH also has contract to provide managed care behavioral
benefits to employees.
14. Maintains network of clinicians (psychiatrists, psychologists,
licensed social workers, nurses, counselors), all have at
least Master’s degree.
15. Also maintains contract with network of attorneys, mediators
and financial counselors.
16. **SEAP COSTS AND BENEFITS PP Slide 23**
	* 1. Up to 3 free assess and refer sessions per episode.
17. Initial face-to-face consultation is for assessment,
counts as 1 session
18. Up to 2 more assessment sessions held, if needed.
(Total number of free sessions – 3) **OR**
19. Up to 2 more brief therapy sessions after initial
assessment only if this will resolve underlying
problem. (Total number of free sessions – 3).
20. If further treatment needed after assessment, individual
(if employee or other individual covered by employee’s
medical benefits) is referred to UBH participating provider
(may be same clinician that did assessment).
21. No cost for drug and alcohol services in-network.
22. Mental health visits cost $10.00 per visit, yearly
maximum 60 visits per individual.
23. Family and marital counseling covered by mental
health benefits.
24. If individual is covered by SEAP, but not employee’s
medical benefits, referral will be made to community
resources or their own insurance carrier if further
treatment needed.
25. Assess and refer available each time covered individual
experiences a different issue (episode).
26. No limit to number of times that SEAP benefit may be
accessed for different issues.
27. Mary Smith story (continued).
	1. Questions on benefits – check with your Personnel Office,
	PEBTF, your insurance carrier, and/or UBH.
	2. Additional SEAP benefits **PP Slide 24**
		1. Legal Consultation
28. Free unlimited telephone consultations with network
attorney.
29. Not available for employee to sue employer.
30. Face-to-face services are discounted 25%, first 30
minutes free (first session only).
31. Financial Counseling
32. Free financial counseling from credit counseling
agency.
33. Assistance with budgeting and debt reduction.
34. Financial planning for future.
35. Does not include lending money or sale of financial
products.
36. Mediation
	1. Family mediation for legal issues that don’t require
	attorney (child custody/visitation).
	2. Initial free telephone consultation with trained mediator.
37. Face-to-face services are discounted 20%.

	1. **CONDITION OF CONTINUED EMPLOYMENT**
38. 80% of contacts from individuals not affected at work.
39. 18% of contacts because of supervisory referral.
40. Mary Smith story (continued).
41. 2% of all people referred to SEAP are required to participate **PP Slide 25**
as Condition of Continued Employment (COCE) or lose job.
42. COCE is written agreement among OA-SEAP, agency, union,
and employee. Employee must contact SEAP, be evaluated,
and comply with all treatment recommendations made by
evaluator.
43. Agency must receive OA-SEAP approval before offering COCE
to employee. Union must sign the COCE agreement.
44. COCE is only considered appropriate in three types of situations. **PP Slide 26**
	* 1. Employee’s behavior poses clear and present threat to self
		or others, or is so disruptive that it dramatically affects
		operations of workplace and coworkers. (Fitness For Duty)
		2. Violation of Commonwealth’s Substance Abuse Policy.
		3. Last chance for performance related issues. Progressive
		discipline exhausted, next step is removal.
		4. Agencies not required to offer COCE.
45. Confidentiality still applies. **PP Slide 27**
	* + 1. Parties who signed agreement are bound by
			confidentiality laws.
			2. Information given by SEAP is limited to employee’s
			compliance with COCE agreement; specifically, if keeping
			scheduled appointments, cooperating with treatment.
			3. Information on nature or type of treatment is **NOT**disclosed.
				1. Employee must participate in and successfully complete
				all phases of treatment as prescribed by SEAP. Failure
				to participate will be violation of COCE and will cause
				termination from employment.
	1. **WHAT CAN YOU EXPECT WHEN YOU CONTACT SEAP? PP Slide 28**
46. Employee or family member calls SEAP toll free number.
	1. SEAP available 24 hours/day, 7 days/week.
	2. Will always talk to “live” person - no phone mail or
	answering service used.
47. SEAP intake counselor will answer phone.
48. Not Commonwealth employee.
49. Licensed clinician with at least Master’s Degree.
50. Intake counselor will ask questions to determine what services
needed.
51. Will screen call for crisis.
52. Will verify eligibility by asking for Social Security Number
of employee.
53. Will ask questions to determine type of services needed.
54. Based on answers, counselor will identify local providers
qualified to evaluate problem(s).
55. Setting up appointment with the evaluator.
56. Intake counselor will offer to contact evaluator.
57. Evaluator will call individual to schedule appointment.
58. If caller wants to contact the evaluator themselves, selects
evaluator from list, calls for appointment.
59. SEAP has extensive list of available evaluators with
various specialties.
60. SEAP evaluators are screened, must meet SEAP-CCO
qualifications. All have at least 5 years post-licensure
experience and are Master’s or Ph.D. level clinicians.
61. Evaluator will try to accommodate individual schedules.
62. Employees can use sick, annual or personal leave for **PP Slide 29**
appointments – show reason as “doctor’s appointment.”
63. Attending the evaluation session.
	1. Treat evaluation like professional appointment.
	2. If unable to attend, cancel with advance notice.
	3. If employee or family member fails to keep appointment,
	evaluator notifies SEAP-CCO.
	4. Session provided free - evaluator may not charge additional fee.
	5. Session usually lasts one hour.
	6. Designed to assess situation, suggest options, and assist
	person in whatever way possible.
	7. Will be asked to sign consent form, stating that person
	agrees to participate in SEAP and evaluator may
	communicate with intake counselor and SEAP-CCO.
	8. Evaluator will present options for continued treatment,
	if needed.
64. Evaluator will explain treatment options.
65. Employee/family member may accept or refuse
recommendations made by SEAP (if not COCE).

Evaluator phones assessment results and recommendations
to intake counselor.

Confidentiality **PP Slide 30**

* + - 1. Everyone is covered under SEAP umbrella of confidentiality.
				1. SEAP Coordinators.
				2. Supervisors.
				3. Union personnel.
				4. Medical benefits insurance carrier (in most cases, PEBTF).
				5. SEAP contractor.
				6. OA-SEAP.
1. Remember, SEAP contractor (UBH) is not Commonwealth
agency.
2. No information is provided to Commonwealth without
written consent of employee (one exception, will discuss
shortly). This consent different from earlier one.
3. SEAP will: **PP Slide 31**
	1. Record information about employee, relative,
	employer, clinician and facility, for reporting
	purposes only - will not identify by name, social
	security number or other identifier.
	2. Adhere to all laws and regulations on confidentiality.
	Federal laws provide up to $500 fine for first offense, up
	to $5,000 fine for subsequent breaches of confidentiality.
4. SEAP will not: **PP Slide 32**
	1. Provide any information without consent form.
	2. Verify any information other than eligibility without
	written consent.
	3. Confirm whether an employee or relative has
	accessed SEAP.
5. Divulge any diagnosis or clinical information
unless required under specific provisions of Federal
or State Laws or adult and child protective services
laws.
	* 1. Most common source of breaches of confidentiality.
			1. Individual themselves.
			2. Friend.

##### When can information be shared without a consent form?

1. When individual is considered imminent danger to
themselves or others.
2. By law, there are rare exceptional situations in which
person’s identity may be revealed by SEAP
professionals.
3. Includes homicidal or suicidal threats and child abuse.
4. Action will be taken to protect the individual from
harming himself/herself or others.
5. Duty to warn and protect.

**WHAT SHOULD I DO IF I AM NOT HAPPY WITH SEAP? PP Slide 33**

1. Want process to work well.
2. If unhappy with a counselor, call the SEAP 800 number for
referral to another counselor.
3. Contact your SEAPCoordinator.
4. SEAP is there for you and family, 24/7.

	* 1. **QUESTIONS? PP Slide 34**
		2. **SEAP VIDEO (optional) Placement also optional** Wrap-up discussion of SEAP program.
	1. About real people and how services used.
	2. Watch for examples of issues discussed today
	and how SEAP helped.
5. **CARD SORT KNOWLEDGE ACTIVITY (optional) Appendix 9**

Appendix 1 – Human Scavenger Hunt

# NUMBER OF

**PARTICIPANTS:** UNLIMITED

1. **PREPARATION:**
2. Prepare a list of instructions similar to the one below that challenges the individual to “Find someone who…”
3. Prepare enough copies of the list for the entire group.
4. **INSTRUCTIONS:**
5. Distribute the list to the group.

1. Instruct participants to mingle among the group in search of the answers to the questions on the list. When they get an answer they should write that answer on their sheet, as well as the name of the person who provided the information.

1. Allow the group to mingle for three to four minutes.
2. At the end of the time period, instruct the participants to return to their seats.
3. Ask the group, by a show of hands, how many were able to answer 3 or more questions, 4 or more questions, and so on. For the individual(s) who were able to answer the highest number of questions (so long as that was less than 13) ask them what question(s) they were not able to obtain the answer to. Then ask the group as a whole if anyone else was able to find someone with that answer.
4. **LIST –“Find someone who . . .”**
	1. Knows the number of the SEAP management directive.
	2. Can name both their local and agency SEAP Coordinators.
	3. Knows when SEAP clinicians are available on the telephone.
	4. Knows 2 types of clinicians available through SEAP.
	5. Has worked for the Commonwealth for \_\_\_ years.
	6. Has worked in \_\_\_ number of state agencies.
	7. Lives in a county other than yours.
	8. Works in a deputate/program office other than yours.
	9. Has been to SEAP training before.
	10. Has the same middle initial as yours.
	11. Has the same shoe size as you.
	12. Knows how many free sessions are available through SEAP.
	13. Knows what COCE stands for.

**Appendix 2 – SEAP Acronyms**

# NUMBER OF

**PARTICIPANTS:** 10-40

1. **PREPARATION:**
2. Prepare a stack of note cards by printing a different SEAP acronym on each card. (e.g., SEAP, CCO, COCE, PEBTF, UBH, PBI, CDL, CISD).
3. Include the actual meaning of the acronym on the note card.
4. Prepare enough note cards so that each participant will receive one card. There will be duplicates of the acronyms.
	1. **INSTRUCTIONS:**
		1. Pass out one note card to each participant.
		2. Instruct the participants to think of another meaning for the acronym, possibly one which has something to do with them, and write it down (not on the note cards).
		3. After two to three minutes, instruct the participants to separate into groups of three to five persons.
		4. Have the participants read their acronyms to each other within their groups, and choose the one they like the most (based on most creative, funniest, most realistic, etc.)
		5. Have groups read out loud to the entire group the alternate meanings for their favorite acronym, and to whom it applies.

**Appendix 3 – SEAP Knowledge Activity**

# NUMBER OF

**PARTICIPANTS:** UNLIMITED

1. **PREPARATION:**
2. Have a sufficient quantity of blank note cards so that each participant will receive one.
	1. **INSTRUCTIONS:**
		1. Give a blank note card to each participant.
		2. Instruct the participants to write down one thing they already know about SEAP, and one thing they would like to learn about SEAP.
		3. Separate participants into small groups to discuss questions.
		4. After two to three minutes, instruct small groups to report to the entire group what the group knows, and what the group would like to learn.
		5. Alternately, rather than breaking the participants into groups, the instructor may gather the cards, place them in a bowl, and randomly pick cards out to read and answer.
		6. Record the topics identified on a blank flip chart or board.
		7. Indicate what topics identified as “would like to learn” will be covered in today’s session.

**Appendix 4 – Articles**

**Number of**

**PARTICIPANTS:** UNLIMITED

1. **PREPARATION:**
2. Make sufficient copies of the provided articles so that each participant receives one. More than one participant can receive a copy of the same article.
3. Alternately, locate appropriate newspaper or short magazine articles and make sufficient copies of them to distribute. A minimum of two articles is needed.
4. Make sure that participants sitting next to each other do not have a copy of the same article.

	1. **INSTRUCTIONS:
	Distribute articles**
5. INTRODUCTION:Some of you may have wondered why the Commonwealth places such emphasis on SEAP awareness for its employees. The sheets being passed around describe some situations where an employee assistance program might be indicated.
6. Instruct the group to take a few moments to review the readings.
7. Allow the participants 1 to 2 minutes to read the articles.
8. Instruct the group to partner with the person seated next to them to discuss their articles, and to consider how SEAP could have been useful in these situations.
9. If time allows, solicit responses from the group, and encourage discussion. Record the responses on a flip chart.

**Appendix 5 – Issues Connection**

**Number of**

**PARTICIPANTS:** UNLIMITED

1. **PREPARATION:**
2. Have blank flip chart at front of room.
3. Use the sample “Issues Connection” as a model for recording information on the flip charts.

* 1. **INSTRUCTIONS:**
		1. INTRODUCTION:Some of you may have wondered why the Commonwealth places such emphasis on SEAP awareness for its employees.
		2. I’m sure you are all aware that there are many stressors in our lives today that just weren’t there forty or fifty years ago. These problems can be broken down into a few categories.

List several categories

**on flip chart**

* + 1. Can anyone tell me, for example, what’s more stressful about raising a family or holding down a job today, that was not an issue for previous generations?

Ask class for answers

* + 1. As people respond, list the contributions on the flip chart. Connect the responses to the main issue with straight lines as shown in the example.
		2. Thank you. I think we have plenty of thoughts and ideas here. How might these issues impact in the workplace? How about if your child gets sick? Do you try to find other care, call off sick, or bring the child to work with you? And where are you, usually, when such a decision must be made?

Discuss

* + 1. Continue the exercise connecting other issues to topics such as employment and the job market, single parenting, education, etc.

**Appendix 6 – Visual Impact of the Need for SEAP**

**Number of**

**PARTICIPANTS:** UNLIMITED

1. **INSTRUCTIONS:**
2. Have participants count off by fours.
3. Ask everyone who was a number 1 to stand.
4. Ask the group to look around.
5. Instructor makes the following statement while the group is still standing: Studies show that 1 in 4 people have some problem or difficulty in their life that could be eased or resolved by getting involved in SEAP. One out of every four people in this room today may well have a need for SEAP services for themselves or a family member.

**Appendix 8 – Mental Health Quiz**

**Number of**

**Participants:** UNLIMITED

1. **PREPARATION:**
2. Make sufficient copies of the Mental Health Quiz (Attachment 1) so that each participant will have a copy to fill out.
3. Make sufficient copies of the article entitled “Mental Health Disorders Are Treatable” from Keystone Health Plan Central (Attachment 2) so that each participant will have a copy.
	1. **INSTRUCTIONS:**
		1. INTRODUCTION:Some of you may have wondered why the Commonwealth places such an emphasis on SEAP awareness for its employees. We’re going to take a little quiz to see how familiar we are with mental health issues.

**Distribute Attachment 1**

* + - 1. Instruct participants to take their best guess on each question. Tell the participants that you will give them the correct answers when they are finished.
			2. Allow 4 to 5 minutes for participants to complete quiz.
			3. Ask the participants to exchange their paper with the person next to them.
			4. Have participants mark the answers as correct or incorrect as you provide the correct answers.
			5. Correct answers

				1. **One** in three Americans suffers from a mental health disorder annually.
				2. **All of the factors listed** are symptoms of depression.
				3. Having **several** of the symptoms for **two weeks or more** may indicate depression.
				4. **75 percent** of those polled had experienced severe depression at least once in their life.
				5. **Seven** out of 10 people do not seek help with their depression.
				6. **80 to 90 percent** of those who seek help with their depression feel much better in a few weeks.
				7. **Medication and therapy** are the two main treatment options for depression.
				8. **True.** Mental health disorders **do** take time to heal.

Ask participants to score the number of questions answered correctly, and return the papers to the person who completed it.

Ask participants, by a show of hands, the number of questions they answered correctly. Start with 2, and work upward.

Make the following statement to the participants: Hopefully, this quiz didn’t depress all of you too much! I would like you to look at a brief article about mental health.

**Distribute Attachment 2**

According to this survey, a majority of people has suffered from severe depression at least once. What does this statistic show?

**Discuss**

The survey also states that seven out of 10 people do not seek help. What might this mean in terms of employees’ mental health and possibly SEAP?

# Discuss

**Appendix 8 - Attachment 1**

**(Mental Health Quiz)**

1. **\_\_\_\_\_\_** percent of Americans suffers from a mental health disorder annually.
2. Check the factors listed below whichare symptoms of depression.
* Inability to concentrate, remember things, or make decisions
* Thoughts of death or suicide
* Changes in weight or appetite
* Feeling guilty, hopeless, or worthless
* Feelings of sadness or irritability
* Restlessness or decreased activity
* Changes in sleeping pattern
1. Having **\_\_\_\_\_\_\_\_** (number) of the symptoms above for **\_\_\_\_\_\_\_\_\_\_ (**number) weeksmay indicate clinical depression.
2. **\_\_\_\_\_\_** percent of people polled had experienced severe depression at least once in their life.
3. \_\_\_\_\_\_ percent of people do not seek help with their depression.
4. **\_\_\_\_\_\_** percent of those who do seek help with their depression feel much better in a few weeks.
5. **\_\_\_\_\_\_\_\_\_\_\_\_\_\_** and **\_\_\_\_\_\_\_\_\_\_\_\_\_** are the two main treatment options for depression.
6. True or False: Mental health disorders take time to heal.

Adapted from *DSM IV* (Washington, DC: APA, 1994) and from the National Institute of Mental Health survey, quoted in *Living Healthy* (Keystone Health Plan Central, Summer 1999, p. 6. (c) 1999 by the StayWell Company.)

Appendix 9

## Card Sort Knowledge Activity

## NUMBER OF

**PARTICIPANTS:**  20-100

1. **PREPARATION:**
2. Choose groups of questions/phrases from the list below, or prepare similar questions/phrases.
3. Write one item or statement from a question group on a note card. If using colored cards, use all the same color or randomly use colors (do not arrange question groupings by color).
4. Post blank flip charts in the corners of the room.
	1. **INSTRUCTIONS:**
5. Divide the number of participants scheduled for your class into small groups (4 to 10 participants per group).
6. Give one note card to each participant.
7. Instruct participants that the statement/question on each card is part of a group of related statements about a SEAP topic.
8. Instruct the group that they must find other participants in the room who have cards with similar statements that would be part of that group of related statements.
9. Give participants 5-7 minutes to find their group.
10. Explain that once participants feel they have found the right group, they should proceed to a corner and write the topic theme of their group on a blank flip chart.
11. After participants have completed the exercise, have each group explain how they determined their common relationship and the title of their topic.
	1. **Suggested Groupings:**
12. Substance Abuse
* Executive Order 1996-13
* CDL Testing
* Cocaine
* Marijuana
* Alcohol
* Chemically dependent
* Enabling
* Can lead to poor job performance
* Fitness For Duty can be used in this situation
* Impaired employee
1. Who’s Who in SEAP.
* Office of Administration
* Agency SEAP Coordinator
* Local SEAP Coordinator
* Supervisor
* Clinician
* PEBTF
* United Behavioral Health
* SEAP-CCO
1. SEAP Can Help With
* Drug/Alcohol Problems
* Financial Problems
* Legal Problems
* Relationship Difficulties
* Single-Parenting Struggles
* Stress
* Depression
* Anxiety
* Physical Abuse
* Eating Disorders
* Mental Health Issues
1. SEAP Benefits
* Clinicians available 24/7
* Up to 3 Free assess and refer sessions
* Toll-Free Number
* Consultation with initial call
* Confidential
* Legal Consultation
* Financial Consultation

**Appendix 10**

**Quotations**

Anyone can hold the helm when the sea is calm.

 Publilius Syrus (first century B.C.), Maxim 358

The first wealth is health.

Ralph Waldo Emerson

And in the end, it’s not the years in your life that count. It’s the life in your years.

Abraham Lincoln

# What sane person can live in this world and not be crazy?

Ursula K. LeGuin

Difficulties are meant to rouse, not discourage.

William Ellery Channing

People seldom refuse help, if one offers it in the right way.

A. C. Benson

The best way to escape from a problem is to solve it.

Alan Saporta