

Happy Pilot Report: Prepared for Provider

Overview

Happy is pleased to provide [a large integrated delivery network] ("Provider") with this report summarizing the results of our successful six-month pilot, which has established a new and trusted source of care for Provider employees by:

- **Significantly increasing utilization of basic mental health resources by Provider employees** through an innovative *proactive* complement to Provider's EAP (**17%** of total employees, **49%** of employees Happy actually spoke with)
- Proactively offering employees "**mental health/wellness check-in's**," focused on prevention, early intervention and a "whole person" approach to mental health and wellness
- **Providing clinical-level behavioral healthcare to Provider employees**, with an emphasis on delivering the essential ingredient of mental health, emotional support, through an evidence-based, peer-based mode.
- **Reducing symptoms of depression among Provider employees** with each subsequent engagement:
 - **70%** of employees with 2 to 3 calls scored a 0 in the PHQ-2
 - **94%** of employees with 4 - 5 calls scored 0 in the PHQ-2
 - **100%** of employees with 6 calls scored a 0 in the PHQ-2
- **Screening for depression, anxiety and social isolation**
- **Reducing the barriers and stigma** that prevent most people who need behavioral health care and services from accessing it
- **Addressing the significant impact of COVID-19** on many employees' and their family's lives
- **Helping Provider respond to Hurricane Ida** by checking in with employees struggling to secure basic necessities in the immediate aftermath of the hurricane

Happy's data, summarized below, support the conclusions that Happy's program increases utilization of mental health services, improves employee mental health, and offers Provider critical insights about its employees' well-being.

Key outcomes are described in greater detail below:

I. Happy Successfully Engaged a Wide Range of Provider's Employees Through its Proactive, Peer-Based Approach

From the beginning of our partnership, Provider and Happy identified **employee engagement** as the defining metric of success. Traditional "**reactive-only**" EAP's have notoriously low utilization rates because they require employees to navigate the formidable "mental health conversion funnel," which requires employees to (i) recognize they are struggling, (ii) identify appropriate resources, (iii) connect

their struggles to particular resources, and (iv) and “raise their hand” for support. Typically, only 1 or 2% of employees overcomes these obstacles and access mental health support.

Happy’s proactive engagement model circumvents these obstacles by reaching out to employees regardless of whether they have recognized the need for (or reached out for) support and thereby significantly increases utilization rates.

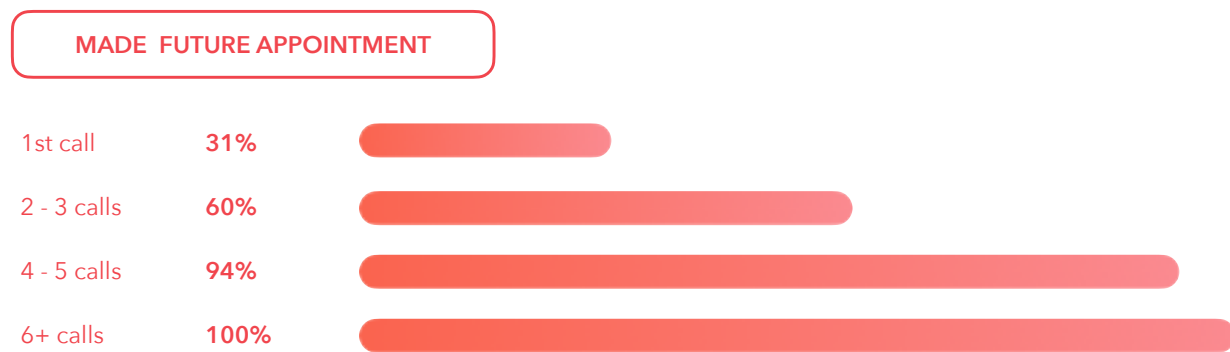
The chart below offers more details on the 7,583 calls that Happy has made to, and received from, Provider employees.

CALL DATA (First Calls)	(48% Positive Engagement)
Total # of Connected Calls	1602
Interested	770
Not Interested	832
Voicemails	2957
Voicemail Unavailable	1074
No Service	216
Wrong Number	80
Total Number of Calls Made	5929
CALL DATA (Follow-Up Calls)	(53% Positive Engagement)
Total # of Connected Calls	406
Interested	217
Not Interested	189
Voicemails	1048
Voicemail Unavailable	170
No Service	21
Wrong Number	9
Total Number of Calls Made	1654
Total # of Connected Calls	2008
Total # of Interested Employees	987 (17% of total employees, 49% of employees we spoke with)

Follow-Up Call Rates Increase with Each Support Session

Happy’s ability to create nurturing relationships with employees is evidenced by the increased likelihood of Provider employees to schedule follow-up calls with each successive support session.

After even two (2) conversations with a Support Giver, a majority of employees made appointments for another support session. Notably, **100%** of employees who reached the EAP limit of 6 therapy sessions requested additional support sessions with Happy’s Support Givers. This trend reinforces the value of Happy as a critical complement to Provider’s existing EAP.



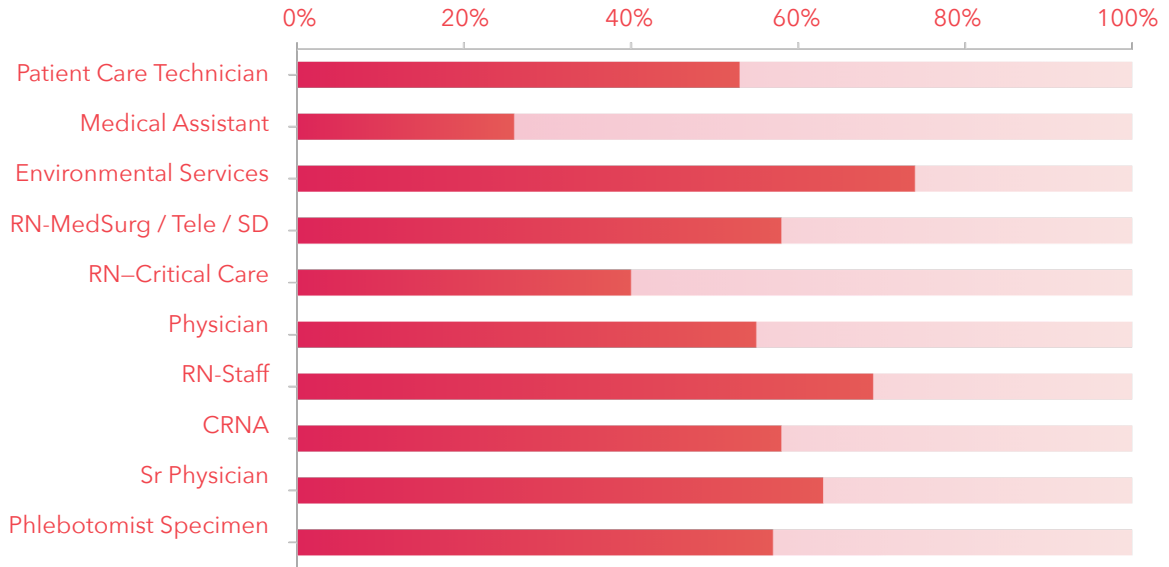
Happy Successfully Engaged a Wide Range of Employees, with Highest Engagement Rates Among Nurses

Happy successfully connected with the full spectrum of Provider employees, from medical assistants and nurses to physicians. We saw the highest interest rate among CRNA’s (**74%** of CRNA’s with whom we actually spoke) and medical-surgical nurses (**69%**).¹ Our lowest “interest rate” was among senior physicians, though even that rate (**25%**) significantly exceeds engagement rates reported by traditional EAPs.

¹ These preliminary data corroborate research suggesting that the demands of the nursing profession take an alarming toll on nurses’ mental health: In a representative survey from Spring 2021 of almost 1,200 nurses, 44% of nurses described their mental health and wellbeing as “bad” or “very bad” – a 10% rise from 2020. 62% of nurses felt their mental health was “worse” or “much worse” than it was during the early spike in COVID-19 cases in Spring 2020. 84% of nurses rated themselves as feeling more stressed or anxious than before the pandemic. (<https://www.nursingtimes.net/news/mental-health/nursing-times-survey-reveals-state-of-nurses-mental-health-one-year-into-pandemic-31-03-2021/>).

JOB TITLE OUTCOMES

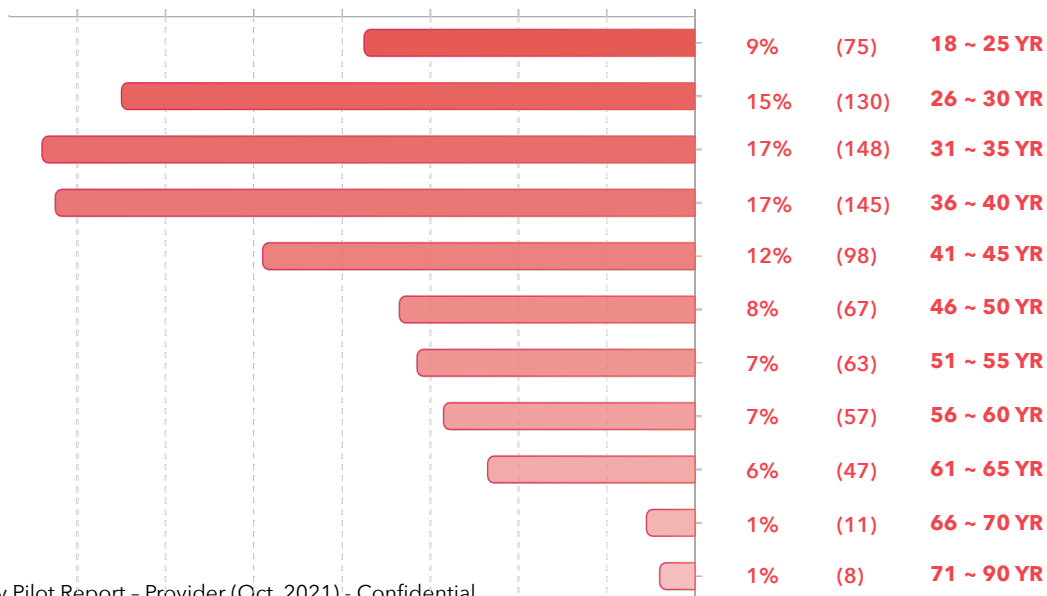
Interested Not Interested



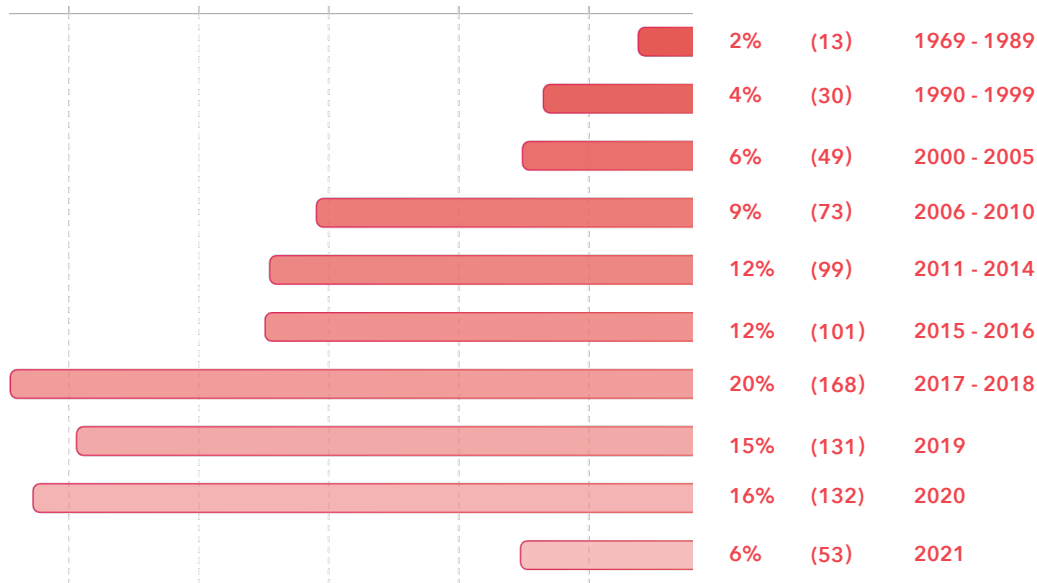
Happy Saw Particularly High Engagements Rates Among Employees Who Have Been Employed by Provider for 1 - 3 Years and are Ages 26 - 40.

Happy’s “universal” peer model successfully engages employees of all ages. We saw our highest engagement rates with employees between the ages of **26 and 40** – this age range represents **49%** of the employees we supported over the last 6 months.

INTERESTED CALLERS BY AGE



INTERESTED CALLERS BY HIRE YEARS



Happy Saw Particularly High Engagements Rates Among Female and Male Employees

Women are more likely than men to seek out mental health resources², whether in the form of medication (20.6% of men versus 10.7% of men) or counseling or therapy (11.7% versus 7.2%).

Happy's data reveal similar trends: **81%** of the employees Happy engaged positively with are women.

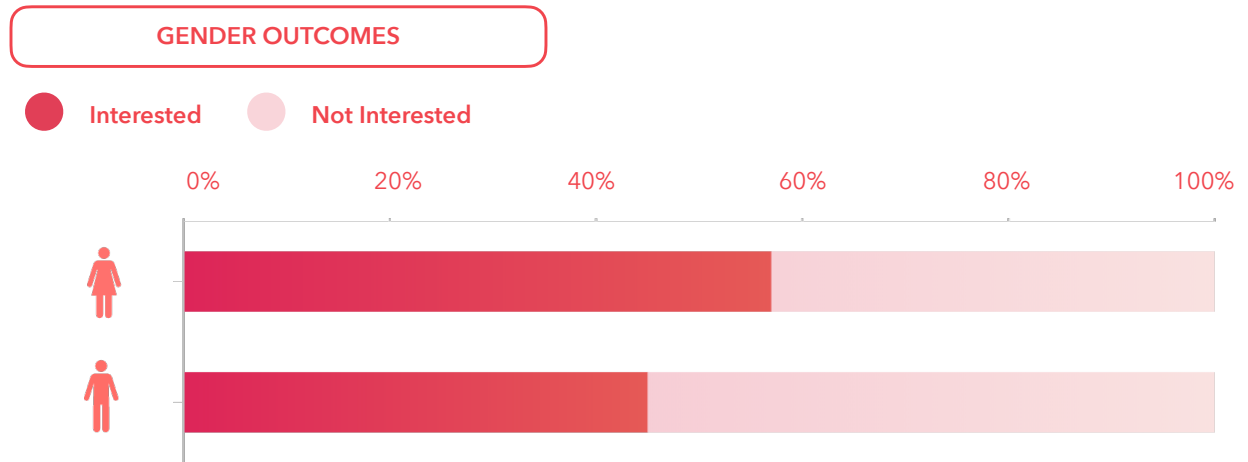
INTERESTED CALLERS BY GENDER



Having said that, of the male employees Happy actually spoke with, **45%** were interested in using our service. We think this engagement rate is a testament to Happy's ability to eliminate traditional barriers to accessing mental health resources, which barriers are particularly pronounced for men.

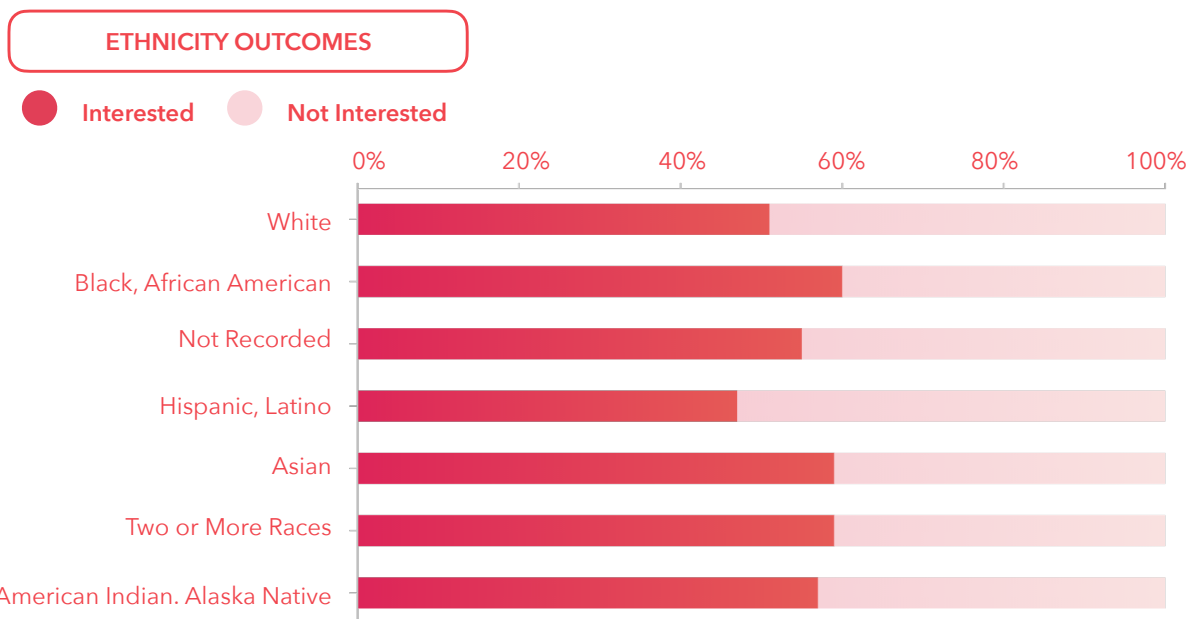
² See <https://www.cdc.gov/nchs/products/databriefs/db380.htm>.

Put simply, Happy offers a direct antidote to the stigma that prevents many men from seeking the mental health support they need – rather than wait for men (or anyone else) to reach out for support, Happy reaches out to them.



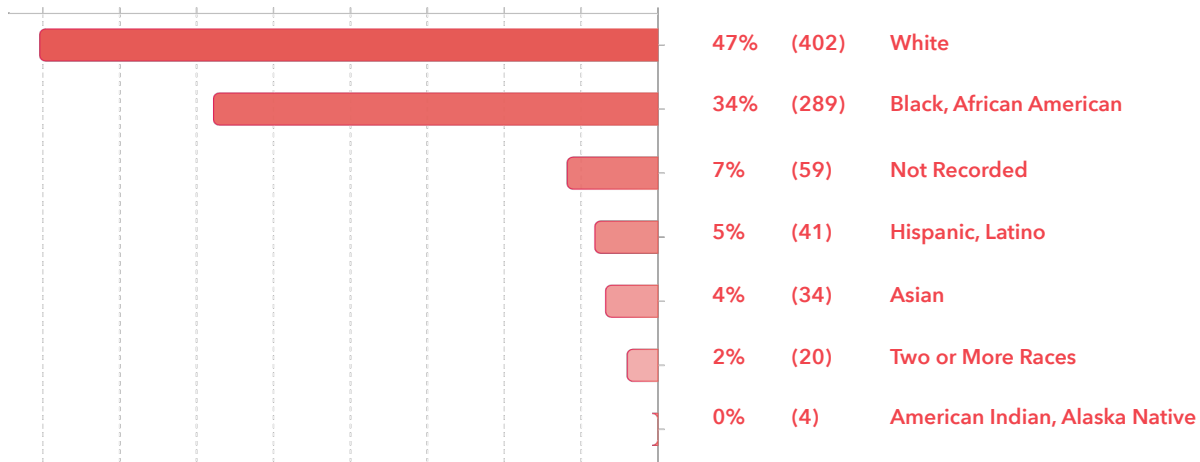
Happy Saw High Engagements Rates Among African American Employees

Although the majority of Provider employees with whom Happy connected are white (**53%** of total employees), the percentage of African American employees Happy connected with who were interested in using Happy’s service (**60%**) exceeded the percentage of white employees interested in our services (**51%**) – although both percentages are high. Given the well-reported disparities in mental health treatment that affect African-American populations³, we are encouraged by the receptiveness of African-American employees to Happy’s service.



³ See <https://www.nami.org/Your-Journey/Identity-and-Cultural-Dimensions/Black-African-American>.

INTERESTED CALLERS BY ETHNICITY



In sum, Happy’s overall engagements rates were exceptionally high among all employees, including populations that are traditionally resistant to mental health support, African Americans and men.

II. Happy Positively Impacted the Mental Health of Provider Employees

A critical benefit of Happy’s service is its ability to achieve **clinical-level outcomes with a peer-based service** (which service also includes mental health assessments).

Of particular note is Happy’s ability to help **reduce symptoms of depression over time**. Our data suggest that with Happy’s Support Givers successfully decreased symptoms of depression with each subsequent engagement:

- o **70%** of employees with 2 to 3 calls scored a 0 in the PHQ-2
- o **94%** of employees with 4 - 5 calls scored 0 in the PHQ-2
- o **100%** of employees with 6 calls scored a 0 in the PHQ-2

Our data suggest that Happy’s Support Givers were also able to **reduce symptoms of anxiety** through ongoing relationships with Provider employees.

- o **23%** of initial calls reported reduced anxiety
- o **45%** of second and third calls reported reduced anxiety
- o **60%** of fourth calls and beyond reported reduced anxiety

Other notable outcomes are as follows:

- For employees who had 2 or more calls with Happy, approximately **88%** of calls resulted in mood improvement
- The likelihood that a call resulted in improved mood increased with increasing call duration/length, call number and total calls
- **Inbound calls, across the board, result in high rates of mood improvement**

III. Happy Effectively Captured Relevant Employee Sentiments

Happy uses natural language processing algorithms to better understand, and to help our partners better understand, the issues affecting their employees.

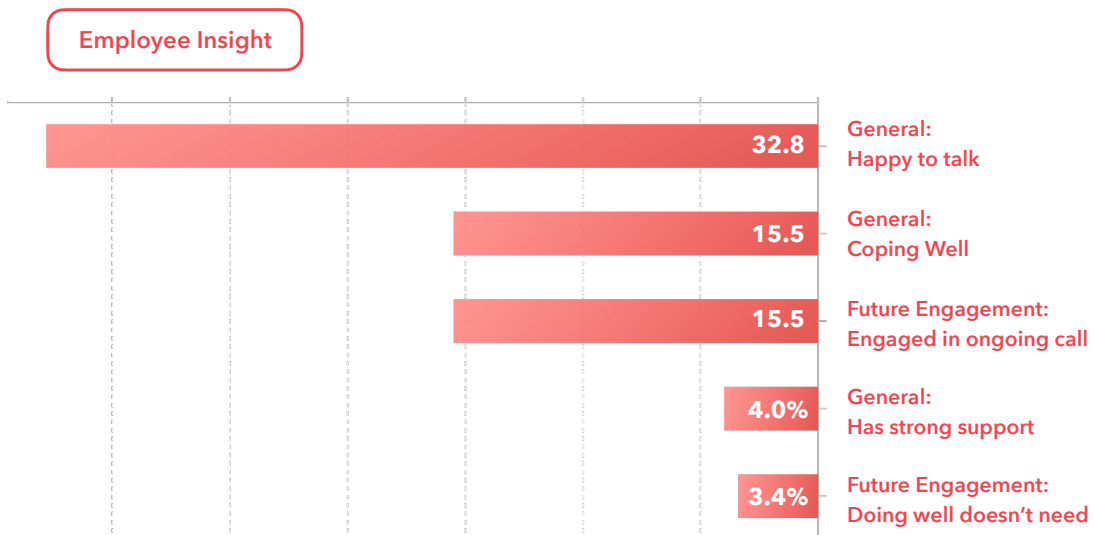
Most employers have little insight about the struggles affecting their employees, and this lack of insight contributes to decreases in productivity and retention.

Although Happy is primarily a mental health service, we are able to gather richer data sets on employee sentiments than many traditional market research or employee insights firms. For our pilot with Provider, our analyses focused on engagement, stressors and overall mood and mental health.

Engagement

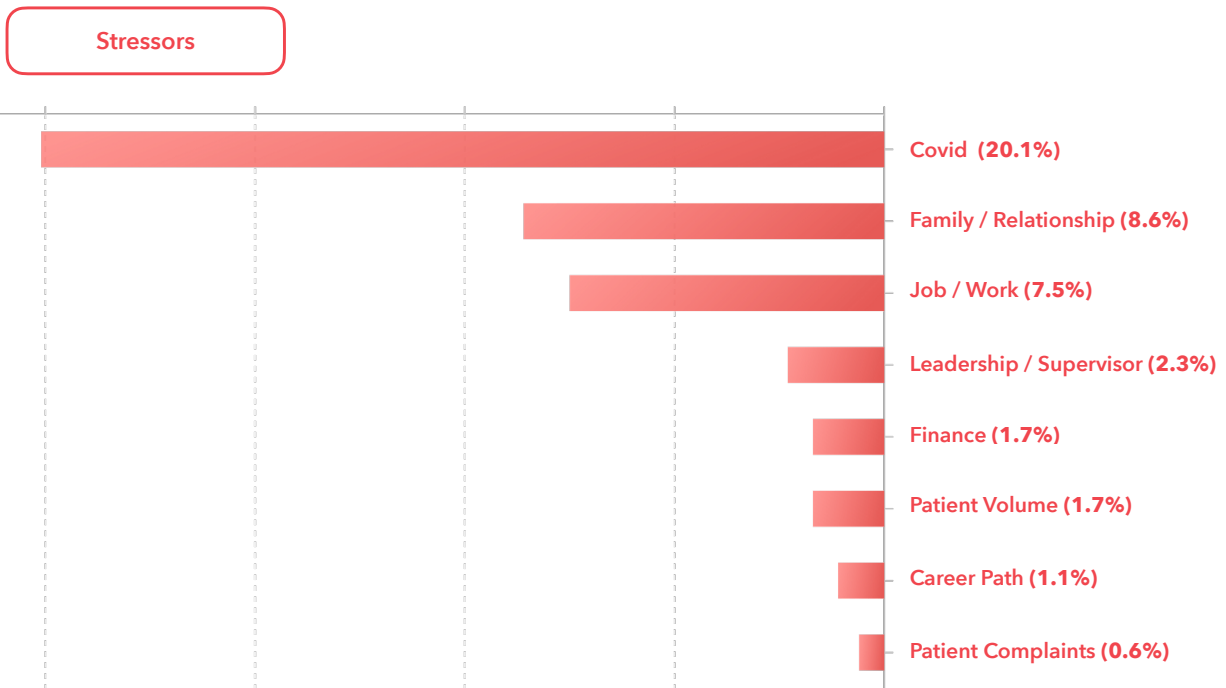
The most noteworthy results from our natural language analyses were as follows:

- Almost **33%** of Provider employees were able and eager to speak with Happy on our initial outreach to them – an even higher percentage of employees responded positively to the service even if they were not available to speak when we reached them. Given the fact that most Provider employees were not (initially) expecting Happy’s call, we view this result as significant and positive.
- Only a small percentage of employees indicated they were coping well (**15.5%**) or that they had strong support systems (**4%**)



Stressors

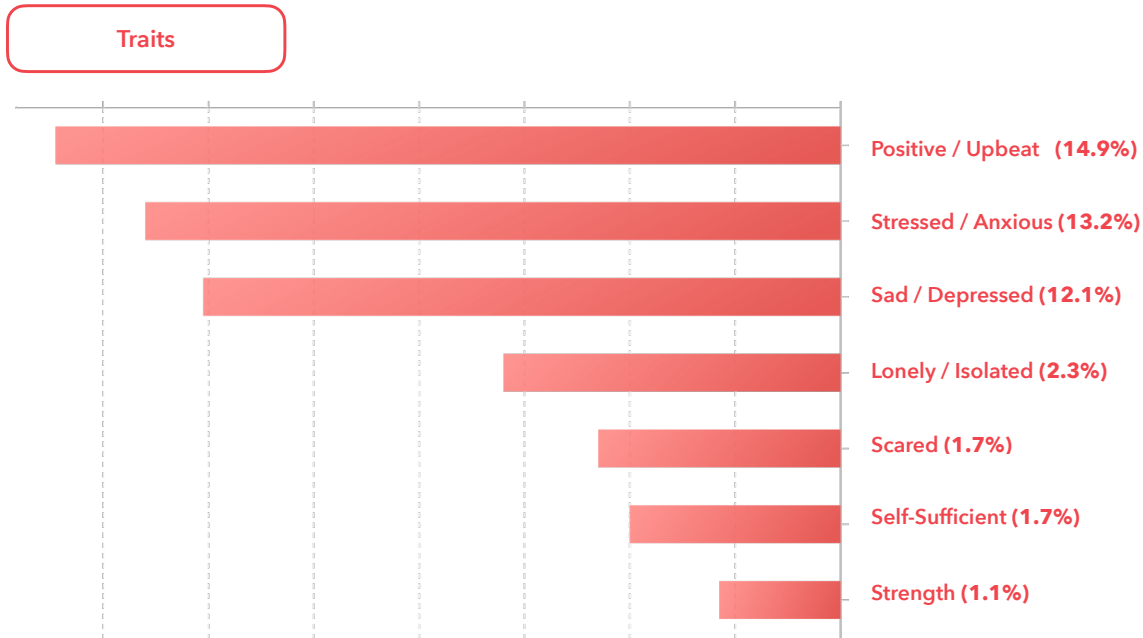
Not surprisingly, COVID-19 topped the list of stressors vocalized by Provider employees. But even in a year when COVID-19 dominated the headlines and filled hospital beds, an equal number of Happy’s support sessions centered around issues unrelated to COVID, including family/relationships and work.



Mood/Mental State

Our analyses of employees’ mood and mental states generated several noteworthy insights, including:

- Only **15%** of employees were upbeat when we spoke with them
- Significant percentages of employees exhibited signs of anxiety (**13.2%**)
- A similar percentage of employees exhibited signs of depression (**12.1%**)



Happy’s natural language analyses help paint a picture of an Provider workforce that is understandably worried, stretched thin and overwhelmed – and understandably grateful to have someone check in on them to see how they're doing.

IV. Hearing and Honoring Employee Voices

One of the most rewarding aspects of our relationship with Provider has been the opportunity for our Support Givers to interact with numerous Provider employees across many walks of life, in most cases lives that have been made substantially more difficult by COVID-19. We provided our service to diverse employees struggling with common life issues, including parenting, finances, the death of family members, making ends meet, accessing basic healthcare and social services, and just finding a way to get through the day. Our Support Givers demonstrated that, regardless of the employee’s life situation, we were able to walk beside and support each employee we were fortunate to serve.

We wanted to draw particular attention to two experiences with Provider employees, (1) a recent conversation with an employee that reveals a lot about the need for, and value of, Happy’s service and

(2) a series of sentiments expressed by Provider employees that highlight the need for a service like Happy to complement Provider's existing EAP.

Featured Story

The employee was very upset when he called and, at first, was hesitant to open up. He loves his job as a translator connecting patients and doctors who have language barriers.

After a while, he finally opened up about what he described as a situation at work where he was being bullied, disrespected, dismissed and alienated by his supervisors. The short version of the story is that at some point he was (in his view) physically bullied, and his supervisors failed to take action against the person who did that to him. In fact, the only other person in the room was laughing while he was getting bullied. They said it was a joke, and as the story spread around his workplace, people continued to laugh at him. His supervisors were not supportive, they did nothing, and he felt unsafe at his job knowing they didn't take it seriously.

He was triggered when his review showed that he had "a conflict with another employee" on his record, without any notes clarifying that he was the victim or what had actually happened.

He had been crying a lot and missing work, and his new supervisor suggested he call Happy.

He was glad to finally be able to talk about the incident and how upset it made him to be treated poorly in a place that prides itself on compassionate care. He is a peacekeeper and didn't want to cause more conflict by pressing the matter. But the more he ruminated, the more depressed he got. When trying to talk about it, he would break down and stutter.

We talked about writing a letter about his feelings, whether he gave it to someone or not.

I pointed out that Provider has an EAP and asked if he wanted that information. He said he felt more comfortable trying out the EAP after talking with me and getting validation and positive reinforcement.

He was a lovely person and reflected that his new supervisor suggesting Happy, and Happy actually being there for him, was the compassion he had been needing.

He was extremely grateful that I helped him gain perspective; it saved him from the dark feelings he was having.

He planned on going back to work and letting his light shine, as it did before.

Happy versus Provider's EAP

A majority of employees in many workplaces struggle with mental health issues, yet only 1 - 2% avail themselves of a traditional EAP's. **This is why Happy's proactive engagement model is critical to a comprehensive approach to workplace mental health.**

Happy uncovered common reasons for these low utilization rates and reinforced the importance of complementing an EAP with services that actually deliver mental health support to the significant percentage of employees who never use an EAP.

In the words of Provider's employees:

*"Employee says she called Provider's EAP more than once, **but was on hold for so long, she gave up and hasn't called again.**"*

*"I asked if she had used the EAP and she said **she had three (3) sessions but didn't like it and they couldn't give her appts in the morning** as that is when she is missing her mother the most."*

*"She said didn't want EAP during the year because **it would be too stressful trying to figure out appointment dates and she didn't want to be seen virtually.**"*

*"She used EAP in the past but **too many schedule conflicts** between her and her therapist to continue."*

*"She called the EAP today and was told that the Psych department makes their own appointments and she was transferred but the person remained on the line. No one picked up and employee was told **"They all must be busy, so call back at another time."***

*"She had her first appointment with EAP one day before I called. **She only sees the EAP once a month.***

*"She is **not interested** in the EAP."*

*"She has the number for EAP, which she has had for a while, and **because she's using Happy now she still hasn't called for an appointment.**"*

*"We discussed her calling the EAP and she said she **never heard of it**, so I gave her the number."*

*"She told me she is depressed and **we talked about her contacting the EAP for an appointment.**"*

V. Happy's Webinar with Dr. _____

Creating a more supportive culture in the workplace requires more than access to emotional support around-the-clock. **Employees must be taught and inspired to better emotionally support each other.**

Happy helps employers accomplish this education and inspiration through webinars and workshops that create safe places for employees to learn about, and gain first-hand experience giving and receiving, emotional support. Our workshops are inspired by the themes shared by our callers, and they teach and inspire employees to better emotionally support their colleagues, family members and friends.

Happy and Provider collaborated on a workshop in Mid-August 2021 entitled, "An Honest Conversation about Mental Health." It was attended by 110 employees and well received. Dr. _____ and Happy's CEO Jeremy Fischbach discussed why it is difficult for frontline workers to find the vulnerability and time necessary to receive mental health support. The workshop also gave employees tips on how to better comfort, encourage and collaborate with their co-workers.

Attendees were also able to share questions in a Q&A session. **The questions suggest a workforce struggling - but motivated - to find answers to critical questions about their mental health.**

Sometimes I struggle with bringing up mental health with my team because they automatically think I am asking if they have a mental illness. Can you help us understand the difference?

Sometimes it is hard to recognize when you're truly struggling and need some additional help. Do you have any suggestions for recognizing within our own self that we need to seek out additional support?

How do I seek out help for a colleague that I know is really struggling without them feeling like I betrayed their trust?

How can I help my team remove the stigma about struggling with mental health? Many of them have mentioned they have gone their whole life without needing help, and they surely won't start now. How can we help normalize mental health just like we normalize seeing an orthopedist when we break an arm?

How can I get my team talking about how they are really doing? Many times when I ask "how are you," they say, "busy" or "good," but it feels robotic. How can I get them truly talking and telling me how they are?

How can I support my team who is grieving loss of loved ones as well as patients they took care of for extensive periods of time?

VI. Partnership Insights and Strengths

Our data suggest that Provider's pilot with Happy went extremely well, as measured by:

- **High engagement rates:** Engagement rates (**17% of total employees, 49% of employees we actually spoke with**) were much higher than comparable rates with traditional EAPs
- **Broad usage:** A broad spectrum of employees are availing themselves of Happy, from front line team members to managers, from high-level executives to employees in environmental roles. We are particularly struck by our success at engaging African Americans and men.
- **Repeat usage:** We are showing meaningful traction with initial engagement and repeat users. Through Happy's thorough follow-up process, it has been easy for Provider employees to pick-up where they left off with Support Givers on previous calls.
- **Positive feedback:** Survey results overwhelmingly indicate that the employees with whom we have connected love the service and are finding it valuable and supportive, increasing positive regard for the resources provided by Provider and the Office of Professional Wellbeing.
- **Confidentially is key:** Employees appreciate that the service is confidential. Based on the detailed and personal content they share about their work and life experiences, it is evident that **employees feel comfortable talking to Happy's Support Givers and using our service** – they genuinely believe, as they should, that Provider does not have access to personally identifiable information about the calls.
- **Gratitude for Provider offering Happy's service :** Some employees do not believe that Provider's COVID-19 response was adequate, and others feel generally underappreciated. Partly for this reason, employees are pleased that Provider is offering Happy and believe Happy is a valuable wellness benefit.
- **The Strain of COVID-19:** It is clear that many employees are still overwhelmed with life – both with COVID and the everyday burdens of caring for their families, children and/or parents. PTSD has set in for some, and there is abundant evidence that numerous employees continue to need to be heard.

VII. Opportunities for Growth and Expansion

- Continue additional marketing and education on Happy's service by distributing materials that further explain our service and acknowledge that employees are currently using it
- Continue to promote scheduled appointments as a way to address scheduling concerns
- Additional workshops highlighting the motivation for the partnership, explaining the offering in more detail, and aids in informing staff about Happy
- Happy Workshop: A live and interactive workshop that illustrates what a supportive workplace looks and feel like. The workshop would facilitate supportive conversations among staff and offer a safe space for them to share experiences and connect with each other.
- Expand and continue programming with employees we have engaged and yet to engage and find additional pathways to encourage self-care and community care.
- Create an opportunity to meet with department heads to share more information about Happy.
- **Expand access to Happy to employees on other Provider campuses and Provider's patient populations**