

TYPE OF COMMUNICATION	DISSEMINATION	DESTINATION	NUMBER	PAGE	OF
General Orders	Department	Directives Manual	331.00	1	5
TOPIC: Critical Incident Stress Management/Peer Counseling	EFFECTIVE DATE 02/21/94	SOURCE JRR/JGA	APPROVED BY MBW	<input checked="" type="checkbox"/> NEW <input checked="" type="checkbox"/> AMENDS <input checked="" type="checkbox"/> RESCINDS 11/04/20	

331.01 PURPOSE

Critical Incident Stress Management (CISM) is a peer-driven program designed to reduce stress in emergency personnel and to assist these personnel with recovery from significant stress encountered at work. The program provides public safety personnel with the opportunity to receive emotional and tangible peer support through times of personal or professional crisis. Additionally, the program may help anticipate and address potential difficulties in dealing with critical incidents.

331.02 POLICY

The Department is committed to developing awareness and educating personnel of the Critical Incident Stress Management Program. It is the intent of the Department and the program to educate departmental personnel of the debilitating effects of professional and personal stresses associated with working in Emergency Services. The program will follow the guidelines established by the International Critical Incident Stress Foundation (ICISF) and the Georgia Critical Incident Stress Foundation (GCISF) and will coordinate the program with oversight provided by department management and community mental health professionals.

CISM team members will obtain the necessary training and skills to provide peer-to-peer intervention for pre-incident stress education, on-scene support, and/or post-incident follow-up services for all departmental personnel. CISM team members will assist supervisors and administrators in assessing personnel who are involved and impacted by critical incidents. Department members assigned to the CISM Team are not professional counselors, but rather a peer-to-peer median to assist individuals or groups in dealing with a stressful situation or obtaining the professional help that may be needed. Recommendations may be made regarding interventions for deeply affected personnel; however, decisions regarding operational procedures or on-scene staffing of an operation remain the responsibility of command personnel.

331.03 CRITICAL INCIDENT DEFINED

Critical incidents are unusually challenging events that have the potential to create significant human distress and can overwhelm one's usual coping mechanisms (Everly & Mitchell, Ph.D., International Critical Incident Stress Foundation, 2008).

Critical incidents may include, but are not limited to:

- Line of duty death
- Serious injury in the line of duty
- Suicide or sudden death of a co-worker, family member or friend
- Serious injury or death of a child
- Multi-casualty incident/disaster
- Officer involved shooting
- Knowing the victim of a traumatic event
- Prolonged incident with loss

- Events garnering excessive media interest
- Any incident likely to produce a significant emotional response

331.04 ACTIVATION

The CISM Team is staffed by peers from a variety of assignments throughout the department who perform their regular job duties and tasks. Supervisors may authorize on-duty peers to respond for CISM service when requested by the Program Coordinator. When a critical incident occurs within the department, priority shall be given to any CISM team member who is asked to respond by the Program Coordinator. Off-duty team members who respond as requested by the Program Coordinator may be compensated for time served.

Anyone may activate a CISM response, including on-scene supervision, participants or others aware of the incident. Should a critical incident occur as defined in this policy, the on-scene supervisor should make contact with the CISM Program Coordinator to consult and assess the need for a response.

Per GDM policy 504.00, Communications will contact the on-call CISM Coordinator any time a critical incident occurs and the "Deadly Force Investigation Team" is activated. Though not part of any post-incident investigation, a CISM peer member will remain on hand to support the involved officer(s) throughout the process.

331.05 ORGANIZATION AND STAFFING

- A. **Administrative Liaison** – The Chief of Police shall appoint a member of the command staff to serve as the Administrative Liaison for the Critical Incident Stress Management Program. It will be the responsibility of the Administrative Liaison to facilitate the resources necessary to allow the program and its participants to provide the necessary services.
- B. **Program Coordinator** – Responsible for the overall management of the CISM Program and responses to activations.
- C. **Assistant Program Coordinator** – Assists and supports the Program Coordinator and may act as the interim Program Coordinator when the Program Coordinator is on leave or otherwise unavailable.
- D. **Clinical Director** – Responsible for overseeing the delivery and quality of counseling services. The clinical director is a licensed professional counselor and offers quality assurance and clinical support and guidance to the CISM Program.
- E. **Mental Health Professionals** – Volunteers who assist primarily in the management process and program development. They may also be available for individual referrals. A medical health professional may serve as the clinical director.
- F. **Peer Counselor** – CISM team members with training in critical incident stress interventions.

This department maintains a proactive commitment to the continued development of the stress management skills of its members. Toward this end:

- Police recruits and communications officers receive training in stress resistance during their basic mandate classes.
- Any interested personnel may request to receive peer counseling training such as the 40 hour Georgia Crisis Intervention Team (CIT) Program course offered at the Georgia Public Safety Training Center (GPSTC).

Supervisors and co-workers are an important link in the CISM Program and will often be the first to recognize the need for support services. Therefore, all members of the department should be educated about and familiar with the CISM Program and its services.

331.06 SERVICES PROVIDED

Crisis Intervention is an acute intervention designed to stabilize and mitigate the crisis response (Everly & Mitchell Ph.D., International Critical Incident Stress Foundation, 2008). The goal of the program is to foster natural resiliency through stabilization, symptom reduction, a return to adaptive functioning, and/or a facilitation of access to continued care.

Critical Incident Stress Management includes several intervention strategies directed toward diminishing the immediate impact of a critical incident and accelerating recovery through strategies and techniques to include:

A. Crisis Management Briefing (CMB)

A structured large or small group meeting designed to provide information about an event. The CMB provides an opportunity to identify and control rumors and educate participants about symptoms of distress and stress management techniques; available resources are offered for continued support.

B. Critical Incident Stress Debriefing (CISD)

A seven-step group crisis intervention tool designed to assist a group of employees directly involved with a significant traumatic event. The Critical Incident Stress Debriefing is not a stand-alone process and should be provided within an integrated package of interventions within the critical incident stress management program. Group crisis intervention is not psychotherapy or a substitute for psychotherapy.

C. Defusing

A small group process provided shortly after a traumatic event and/or before a group leaves the workplace. Defusing offers an opportunity to begin exploration of the individual reactions to an event and is an opportunity to provide immediate information on healthy coping.

D. Demobilization

This is a brief meeting between team members and participants of a large-scale incident or disaster who have been released from the scene. This meeting is held conveniently near the scene and may include a 10 to 15 minute period of stress reduction education followed by a period of rest and opportunity to disengage from the incident. It may also include food and drink for the participants.

E. Peer Counseling

Peer counseling provides a way for personnel and their families to “talk out” personal or professional problems with colleagues (peers) with the assurance that their confidences will not become part of any administrative or investigative review.

Peer counselors are specifically trained colleagues, not professional counselors, mental health professionals, or therapists, whose primary function is to listen to and assess the needs of their peers. The program is intended to complement other department resources such as the Employee Assistance Program (EAP), community mental health professionals, or the Chaplain program. When necessary, peer counselors will facilitate referrals to these resources.

An updated list of trained peer counselors can be located on the Department’s “L” Drive under the “On-call” folder and then under the “CISM” folder. When necessary, employees may contact the Communications Section (911 Center) to obtain the contact information for the CISM Program Coordinator.

At any time and for any reason, department members or their families may contact the CISM Program Coordinator. The Coordinator, or their designee, remains available to assist with selection of or establishing contact with a peer counselor.

Individuals wishing to receive peer support may voluntarily choose or reject a particular peer counselor by any criteria they believe important.

No records are created or maintained of peer counseling activity. No notes are made of meetings between peer counselors and individuals.

- Except under extreme circumstances where the safety of department personnel or others has been threatened, statements made or details disclosed by personnel to peer counselors will be considered private and will not become part of any supervisory, administrative or investigative review.
- Peer counselors do not volunteer information to supervisors and if asked will remind supervisors of the confidentiality guidelines.
- Peer counselors will be sensitive to role conflicts that could affect future decisions or recommendations for assignment. Additionally, they will be prepared to refer those individuals with problems about which they may

have strong personal issues or with larger troubles than the para-professional peer counselor is trained to address (i.e. the Employee Assistance Program).

- Peer counselors who become aware of an increased potential for the following extreme circumstances (or threats) must take immediate protective action (intervention) to prevent:
 - Suicide
 - Homicide
 - Child endangerment/Child Abuse
 - Other life threatening circumstances
- Protective action referred to above is dependent upon the perceived urgency of the situation and the level of cooperation expected from the individual. Interventions may include but are not limited to:
 - Obtain a verbal contract (promise) with the individual not to proceed any further with the threatened action before professional (mental health or other) assistance has been accessed by self-referral. This should be within the next business day or sooner if necessary.
 - Assist the individual in making contact with the mental health professional or facility of their choice. (May include dialing the phone and/or transportation to a facility.)
 - If circumstances are extreme and the individual is NOT cooperative and cannot be trusted to exercise good judgment under the circumstances, the peer counselor will contact the individual's watch or precinct commander to initiate an administrative remedy.
- Peer counselors must advise individuals that statements made or details disclosed are not protected by legal privilege and that confidentiality is administratively provided and may not be recognized in court proceedings.

331.07 TEAM MEMBERSHIP

A. Qualifications

CISM Team members volunteer for appointment and are expected to possess certain personal qualities and characteristics. Public safety can be complicated for those not familiar with the job and the array of personalities that may be found working within the profession. To qualify for the CISM Team, personnel:

- Must have the ability to maintain confidentiality of material presented in crisis intervention
- Must have the ability to be flexible and available as the need arises and attend meetings as scheduled
- Must be non-judgmental, aware of one's own biases, and be able to accept difference in values of those who are being debriefed
- Must be open to the presentation of information regardless of its emotional content during a crisis intervention incident
- Must be empathetic, aware of the wide range of feelings that will have occurred during a critical incident and acknowledge the validity of such feelings
- Must be trusted and respected amongst peers
- Must have two (2) years of experience in public safety or possess experience and/or have a background in crisis management/counseling

B. Joining the CISM Team

Employees interested in becoming a CISM peer support team member should submit a letter of interest through their chain of command to the Program Coordinator. The Program Coordinator will provide the interested personnel with a "Team Letter of Interest," which will be completed and returned to the Program Coordinator.

A membership review board will convene as needed to consider new appointments to the program. The review board will consist of the Administrative Liaison, the Program Coordinator, and a mental health professional familiar with peer counseling issues and two (2) team members. Candidates' work history and ethics will be considered. Further, the membership review board may contact previous and present supervision of the candidate in order to acquire additional information. Efforts will be made to develop and maintain peer counselors from a variety of assignments throughout the department.

Once personnel have been evaluated, applicants will receive a letter of acceptance or denial. If accepted, personnel will be placed on the team roster on an "inactive status."

Newly appointed Peer Support personnel must complete the following classes, or approved equivalency as determined by the Program Coordinator, before becoming an active member:

- Group Crisis Intervention
- Assisting the Individual in Crisis

C. Remaining on the Team

Staying up-to-date with CISM and communication skills is imperative for team members. Continuing education is available via online courses and additional ICISF courses.

Team members are expected to attend the scheduled quarterly meetings, unless an excused conflict arises. Team members who miss three (3) consecutive meetings will be placed on inactive status. Team members who miss four (4) consecutive meetings may be removed from the team, pending review by a membership review board.

CISM team members are also expected to respond to call-outs as available as well as maintain knowledge and skills applicable to crisis intervention. Team Members attending quarterly meetings and responding to call-outs during off-duty time frames will receive overtime compensation.

Program members remain responsible for their own emotional wellness, seeking informal or formal assistance for normal or unusual fluctuations of their own mental health. Peer counseling is emotionally strenuous. Any member may request without sanction a break in their availability for call out. If necessary, they may request their name be dropped entirely from the list of peer counselors for a period of time or indefinitely.

D. Suspension/Revocation of Team Membership

CISM team membership is revocable upon recommendation of the clinical director, Program Coordinator, or a team member's chain of command for cause. A membership review board will convene to review circumstances prior to removal from the program; the Program Coordinator may place any team member in an inactive status as he/she sees necessary. Cause for revocation or suspension includes but is not limited to:

- Violation of the team's confidentiality agreement
- Failure to follow team protocol or applicable departmental policy including not utilizing the Mitchell Model for CISM activity
- Organizing or attempting to organize any type of intervention, activity, or program without the Program Coordinator's knowledge or approval (i.e. self-dispatch)
- Failure to attend an intervention to which the member committed
- Failure to meet any or all of the team member requirements
- Acting against the expressed direction of the Program Coordinator or clinical director
- Any misrepresentation of the affairs or operations of the CISM program

Prior to suspension/revocation of a team member, the Program Coordinator should communicate with the individual to evaluate the situation and try to come to an agreeable solution. Should a team member wish to resign from the team, they need to submit a letter to the Program Coordinator. Leaving the CISM team on good terms shall in no way reflect upon an individual's character or job performance.