

MODEL POLICY FOR LAW ENFORCEMENT AGENCIES REGARDING AGENCY WELLNESS AND PEER SUPPORT TEAMS

Original Model Policy Approved by WASPC Membership on May 23, 2024

I. PURPOSE AND SCOPE

Describe the purpose and scope of the policy for agency wellness and peer support team.

II. DEFINITIONS

Definitions related to this policy include:

Confidential – A professional or ethical duty for a Peer Support Counselor to refrain from disclosing information from or about a recipient of peer support services, barring any exceptions that should be disclosed at the outset of any conversation.

Crisis Management Briefing (CMB): An informational group crisis intervention technique for heterogeneous groups or large (up to 300) populations. A CMB is a very versatile group support process that can be used with any event that has a significant impact on a community of responders, family members, support staff as well as primary victims who have been impacted by the incident. A CMB intervention may be used as often as necessary to equalize information to the group, reduce rumors, and reduce any sense of chaos that may arise during the incident. Providers include peers, chaplains and mental health professionals trained in the appropriate model.

Critical Incident – An event or situation that may cause a strong emotional, behavioral, spiritual, cognitive, or physical reaction that has the potential to interfere with daily life.

Critical Incident Stress Debriefing (CISD) – A peer driven clinician guided, group discussion of a traumatic event. This is a standardized approach using a discussion format to provide education, support and emotional release opportunities for members involved in work related critical incidents.

Defusing: A small interactive group intervention applied within hours of an incident designed to mitigate the impact of a traumatic event. Providers include peers, chaplains and mental health professionals trained in the appropriate model.

Peer Support – Mental and emotional wellness support provided by peers trained to help agency personnel cope with critical incidents and certain personal or professional problems.

Peer Support Counselor – A member of the Peer Support Team who has received training to provide emotional support, moral support and counseling to a member who needs those services as a result of an incident. It also includes non-employees who have been designated by the Chief/Sheriff to provide those same services.

Privileged communications – A legal protection from being compelled to disclose communications in certain protected relationships such as Peer Support Counselor and Client and others outlined in RCW 5.60.060(6).

III. GOALS

Describe agency goals for wellness and peer support team here.

IV. ORGANIZATION

Describe the structure of the team here. Participation in the program as a Peer Support Team (PST) member is voluntary. PST members may include commissioned personnel, non-commissioned personnel, chaplains, retirees, and mental health professionals. When making assignments agencies should consider conflicting roles such as direct supervisors, or guild or union responsibilities.

ROLES:

PEER SUPPORT TEAM COORDINATOR:

Appointed by the Chief/Sheriff. The coordinator should collaborate with advisers (e.g., Human Resources, legal counsel, licensed mental health professionals, qualified health professionals) as appropriate to fulfill the responsibilities of the position, including but not limited to:

- Maintain PST designation letters in personnel files.
- Maintain PST roster.
- Recruit and coordinate screening and selection process for personnel interested in being PST members.
- Review activity or other PST reports.
- Review complaints by department members regarding the actions of a PST member.
- Develop and maintain resources lists and contacts.
- Coordinate training for PST members.
- Offer guidance to PST Members when problems occur.
- Coordinate agency wide wellness training.
- Deliver wellness information, training, and support to all agency personnel.

CLINICAL DIRECTOR

Appointed by the Chief/Sheriff. The Clinical Director should be a mental health professional that will provide clinical oversight to the team and may fulfil the following:

- Consultation
- Selection of team members.
- Policy review.
- Operational supervision and guidance to PST members.
- Training for Peer Support Team

PST MEMBER (PEER SUPPORT COUNSELOR):

Appointed by the Chief/Sheriff at the recommendation of the PST Coordinator.

- Attend peer support training as assigned by PST Coordinator.
- Conduct themselves in a manner consistent with the PST goals and objectives.
- Maintain confidentiality within the guidelines provided in this policy.
- Provide employees with pre- and post-critical incident support.
- Maintain contact with PST Coordinator regarding PST activities.
- Provide referrals to licensed Mental Health Professionals and other resources, where appropriate. Referral should be made to qualified, appropriate resources in situations that are beyond the scope of the PST member's training.

PEER SUPPORT MEMBER SELECTION CRITERIA

The selection of a department peer support member will be at the discretion of the coordinator. Selection should be based on the member's:

- Desire to be a peer support member.
- Experience or tenure.
- Demonstrated ability as a positive role model.
- Ability to communicate and interact effectively.
- Evaluation by supervisors and any current peer support members.
- Retirees should have retired in good standing.
- MHPs should be competent in first responder culture.

There are no restrictions on the amount of time an employee may serve as a peer support team member. Members may resign from the team at any time by providing a written memo to the peer support team coordinator. Members may be removed from the team for conduct inconsistent with the program policy, goals, and objectives. Negative job performance resulting from peer support team member duties should be reported by the member's regular supervisor to the peer support team coordinator.

V. TRAINING

AGENCY WIDE

The coordinator or the authorized designee should collaborate with the department training coordinator to provide periodic agency-wide education and training on topics related to physical and mental health and wellness, including but not limited to:

- The availability and range of Department wellness support systems.
- Suicide prevention.
- Recognizing and managing mental distress, emotional fatigue, post-traumatic stress, and other possible reactions to trauma.
- Alcohol and substance disorder awareness.
- Countering sleep deprivation and physical fatigue.
- Anger management.
- Marriage and family wellness.
- Benefits of physical exercise and proper nutrition.

- Effective time and personal financial management skills.
- Peer support team member roles, responsibilities and ethics.
- Training on confidentiality and privileged communications.

Training materials, curriculum, and attendance records should be forwarded to the training coordinator as appropriate for inclusion in training records.

PEER SUPPORT MEMBER TRAINING

A Department peer support member should complete Department- approved training prior to being assigned. Training should include at a minimum the following topics:

- Psychological crisis and psychological crisis intervention
- Resistance, resiliency, recovery continuum
- Critical incident stress management
- Evidence-based practice
- Relevant research findings
- Basic crisis communication techniques
- Common psychological and behavioral crisis reactions
- Empirically-derived mechanisms
- Specific peer support model
- Suicide intervention
- Risks of iatrogenic “harm”

Before conducting group interventions additional training should be received in:

- Relevant research findings
- Relevant recommendations for practice
- Incident assessment
- Strategic intervention planning
- “Resistance, resilience, recovery” continuum
- Large group crisis interventions
- Small group crisis interventions
- Adverse outcome associated with crisis intervention
- Reducing risks
- Critical Incident Stress Debriefing (CISD)

This should be a foundational level of training. Agencies should support ongoing training for all peer support team members.

VI. CONFIDENTIALITY

PEER SUPPORT COMMUNICATIONS

Communications between a qualified peer support counselor and a member are considered to be

privileged where allowed by law (RCW 5.60.060).

Communications to crisis referral services by members and all records related to the communications shall be confidential except as allowed by RCW 43.101.425.

This confidentiality policy applies except for matters that involve disclosures by an employee to a PST Member concerning any of the following:

- Suspected danger to self or others
- Domestic violence (RCW 10.99.090)
- Abuse or neglect to a vulnerable adult or child

VII. PROCEDURES

NOTIFICATIONS AND CALL-OUTS

Agency to define

EXAMPLES OF PEER SUPPORT TEAM SERVICES

PST Members may provide a variety of support services to department employees. Some examples include:

- Providing supportive assistance, referral and resource services to employees who have requested PST services.
- Responding to the scene of a stressful or critical incident when requested by the incident commander, division commander or PST Coordinator.
- Providing employees with information regarding common reactions, events and expectations following a critical incident.
- Protecting employee from media bombardment.
- Coordinating assistance for family members.
- Arranging for notifications and/or transportation of family members.
- Making recommendations to Mental Health Professionals regarding employees having a particularly difficult time.
- Provide peer services to other agencies when requested.
- Facilitate interventions as appropriate.
- Advocating for the needs of employees and their families.

REPORTING

Agency to define. Reminder: Any data collection on peer support team activities should not include employee names or identifiers.