

# CRITICAL INCIDENT STRESS MANAGEMENT

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<i>Special Instructions:</i>		
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## I. PURPOSE

The purpose of this policy is to outline this agency's response to personnel who, as a result of responding to or becoming involved in a critical incident, may be in need of peer counseling or mental health services. The duties and responsibilities of the law enforcement profession are often emotionally demanding and difficult, and employees generally risk experiencing stress and related emotional difficulties. Emotional problems may have a negative impact on personnel performance, and in extreme instances, may present a danger to the welfare and safety of employees, their families or the general public. Therefore, it is the policy of the Cheswold Police Department to provide all personnel with access to peer counseling and/or mental health services to help them preempt and resolve emotional difficulties and, under emergency conditions, take those measures necessary in the provision of mental health services to ensure the well-being and safety of employees and the general public.

## II. DEFINITIONS

1. **Critical Incident:** Any situation, which has such profound emotional impact that it has the potential to interfere with an employee's ability to function.
2. **Peer Debriefer:** Peer debriefers shall be authorized by this agency to provide voluntary counseling services to agency employees only after having successfully completed this agency's prescribed course of instruction. Peer debriefers must receive a minimum eight (8) hours of approved training with bi-annual updates.
3. **Defusing:** A brief discussion between involved employees and a peer debriefer immediately following a critical incident. It is used to restore involved employee's cognitive functioning and prepare them for future stress reactions resulting from the incident. Peer debriefers will not discuss details of the event with the employee as they are not covered under legal confidentiality guidelines and it would not be considered privileged information.

4. **Debriefing:** A confidential meeting between employees involved in a critical Incident and a CISM team, usually following a defusing. This meeting can be on an individual or group basis. It is used to inform and educate involved employees on stress management techniques. It is not an operational critique; rather the focus is on assisting the employee or group with coping behaviors and techniques.
5. **Mental Health Professional:** A licensed professional, departmentally authorized social or mental health caseworker, counselor, psychotherapist, psychologist or psychiatrist. When a mental health professional is present at either a defusing or debriefing, confidentiality guidelines do apply and all statements are considered privileged.

### **III. PROCEDURES**

- A. **CISM Team Activation** - It shall be the responsibility of a shift Supervisor and/or officer on scene to notify the Chief of Police, or his/her designee of the following types of incidents:
  1. **Suicide of a member or employee**
  2. **Any police related shooting**
  3. **Any mass casualty incidents or natural disaster (i.e. plane crash, hurricane, tornado)**
  4. **Death or severe injury to a child**
  5. **Any other incidents in which the circumstances were so unusual or the sights and sounds so distressing as to produce a high level of immediate or delayed emotional reaction**
  6. **Riot**
  7. **Hostage/Barricaded Subject Situation**
- B. **The Chief of Police, or his/her designee will coordinate with the Delaware State Police, New Castle County Police, or other State of Delaware Critical Incident Stress Management Team to respond.**

### **IV. Access Procedures**

- A. **Information regarding State of Delaware Peer Counselors or Critical Incident Stress Management assistance will be posted in the patrol room and distributed to all officers for their needs.**

- B. Agency employees may voluntarily seek the assistance of peer counselors or CISM personnel at any time.
- C. Peer counselors may be used to assist officers and their families in cases of job related crises through informal counseling and support and through referral to professional mental health service providers where necessary.
- D. Employees should use peer counselors as a referral source where appropriate and may, with or without anonymity, provide the name of a fellow officer or employee for discreet and confidential intervention.
- E. Strict confidentiality shall be maintained between the peer counselor and the employee. Other than the noted exceptions, nothing discussed between counseling participants shall be divulged to any third party without the express written consent of the employee.
- F. As an alternative to peer counseling, employees are encouraged to contact their personal clergy, physicians or mental health professionals when deemed necessary for resolving emotional crises.

## **I. PROFESSIONAL MENTAL HEALTH SERVICES**

- A. Mental health service providers are available to all employees of this agency and their families through the Employee Assistance Program (EAP) or as allowed by insurance coverage. Use of these services shall be treated in the same manner as any other work-related illness or disability.
- B. The services of mental health professionals may be invoked by employee self referral, referral by a supervisor, through the Chief of Police or by policy following life-threatening, traumatic experiences.
- C. Supervisory personnel are responsible for continuously monitoring personnel performance and behavior and shall be alert to behavioral indicators that suggest emotional problems. These include, but are not limited to:
  - 1. Uncharacteristic or repeated citizen complaints, particularly those related to excessive force;
  - 2. Abrupt changes in prescribed employee response or behavior such as excessive tardiness, absenteeism, abnormal impatience, irritability or aggressiveness, or repeated instances of overreaction or failure to act in the line of duty;
  - 3. Irrational or bizarre thoughts or actions,
  - 4. Unexplained changes in work habits or patterns of leave usage;
  - 5. Erratic mood swings; and

6. Indications of alcohol or drug abuse.
- D. Supervisory personnel who observe or receive information regarding the above types of behavior shall consult with the employee for an explanation and, where necessary, may confer with peer counselors, managers or mental health professionals for guidance.
- E. Where circumstances indicate, the supervisor shall suggest a voluntary self referral to the employee. Where emotional impairment/dysfunction is suspected, either prior to or following these consultations, supervisory personnel shall determine whether an administrative referral to mental health professionals is warranted.
- F. Under emergency conditions, when an employee's behavior constitutes a significant danger to themselves or others, a supervisor may order a direct and immediate referral for mental health evaluation. A mental health professional, who is not part of the CISM Team, shall be contacted for instructions prior to the referral and transportation shall be provided for the employee.
- G. In instances where supervisory personnel believe that an employee is experiencing serious or debilitating emotional or psychological problems, they shall direct that the employee be interviewed by an agency-authorized mental health service provider.
1. A written copy of the referral order shall be forwarded to the employee, to the mental health service provider and to the Chief of Police.
  2. Any personnel involved shall take all necessary steps to ensure the confidentiality of the referral order. Any release of information the referral to anyone shall only be made with the approval of the Chief of Police, or his/her designee.
- H. The mental health professional shall
1. Maintain the confidentiality of all communications concerning the referral and its findings;
  2. Acknowledge receipt of the order and advise whether the officer responded; and
  3. Advise the Chief of Police or his designee of the officer's fitness for duty and provide recommendations for assignment.
- I. Following the mental health assessment, an employee may be returned to the original duty assignment, reassigned to alternative duty, placed on temporary light duty or placed on administrative leave as deemed appropriate.

1. An employee's work status shall be reevaluated every 10 days while under the care of a mental health professional or until such care has been terminated.
  2. An employee may be returned to regular duty, his work assignment may be modified or he may be temporarily or permanently relieved from duty at any time in accordance with recommendations of the mental health professional.
  3. Reinstatement to regular duty of any employee requires the affirmative recommendation of an agency-authorized psychologist/psychiatrist.
- J. Job security and promotional opportunities shall not be jeopardized by an employee solely for having participated in psychological counseling services. However, failure to seek treatment to correct deficiencies in job performance may reduce or eliminate promotional consideration or jeopardize continued employment.

ORDER EXECUTED and ISSUED this 13th day of April, 2013.

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Christopher Workman  
Chief of Police