

State of Connecticut



Department of Emergency Services and Public Protection

STOPs Peer Support Monthly Report

State Troopers Offering Peer Support

Peer Contact (Supporter) Name: _____

Contact report for month of _____

Number of NEW contacts	
Number of ongoing contacts	
Total number of contacts for month	
Types of issues	
Trauma response	
Family/Relationship	
Financial	
Legal	
Employee gambling	
Employee substance abuse	
Personal stress	
Job stress	
Veterans concerns	
Number of contacts addressed by PSV	
While on duty	
While off duty	
Number of referrals to EAP	

- A referral is a mutual agreement between the Peer Support Volunteer and the individual to call EAP whether a call was made or not.

Questions or concerns about the program or suggestions for improvements:

Please e-mail or fax this document to Sgt. Troy S. Anderson, STOPs Coordinator.

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