

Department Policy

Peer Support Team (PST)

Effective: xx/xx/20xx

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203.01 Policy

The Peer Support Team (PST) is hereby established to provide peer support to personnel and their families experiencing personal and/or work-related stress. The PST also functions to provide peer support during and following traumatic incidents resulting from performance of duty. Peer support shall be conducted under the general supervision and/or direction of the PST clinical advisor. The clinical advisor must be a licensed mental health professional, including but not limited to, Licensed Professional Counselor, Master of Social Work, Psychologists, or Psychiatrist.

203.02 Definition

Peer Support Team – A team of personnel who have received specialized training to act in a capacity to support department personnel and their families.

203.03 Procedure

- A. **Organization and Administration**: The PST is composed of department employees and operates under the general direction of the PST clinical advisor and the specific direction of the Team coordinator and assistant coordinator. If the Team coordinator is unavailable to administer the Team, the assistant coordinator assumes responsibility for Team coordination. In the event of the absence of both the Team coordinator and the assistant coordinators, an acting coordinator will be designated.

- B. **Selection of Team Members**:

Coordinators: The PST coordinator is designated by the Public Safety Chief.

The assistant coordinator is selected by the PST Team coordinator and the PST clinical advisor.

Team members: The PST is open to all commissioned and non-commissioned personnel. PST applicants must submit a letter stating their interest and qualifications to the PST coordinator. PST applicants may be interviewed by the PST coordinator and selected members of the PST to determine suitability. PST members may provide input before an applicant is considered for appointment to the Team. The PST coordinator submits a list of qualified applicants to the Public Safety Chief for final approval and appointment to the PST.

- C. Confidentiality: C.R.S. 13-90-107 provides direction on those who may not testify without consent and outlines exceptions to the law. The restrictions and exceptions for Peer Support Team members is specifically outlined under 13-90-107 (m) with its various paragraphs and clauses. All PST members are expected to fully comply with this state law. See C.R.S. 13-90-107 for more detailed information.
- D. Availability of Team: PST members may be contacted by requesting such contact through dispatch.
- E. Team Response: PST members functioning in their peer support capacity may respond to the scene of any incident serious enough to warrant a clear need for PST support or other location to meet with involved personnel to provide immediate support. PST members may respond to any incident at the request of a supervisor, or at the request of the PST Team coordinator or clinical advisor. PST members should make every effort to contact the Team coordinator prior to responding to a traumatic incident. If this is not possible, PST members must notify the Team coordinator as soon as practical.
- F. Use of Team: While engaged in a peer support role, PST members shall not be utilized for incident investigation, other assignments, or other roles except in emergency circumstances.
- G. Traumatic Incident Debriefing: Debriefings are conducted only in those circumstances where it is assessed to be the most appropriate support intervention. The PST, in conjunction with the PST clinical advisor, acts as a debriefing resource for employees who have recently experienced a traumatic incident. When deemed appropriate, the PST clinical advisor and PST coordinator will arrange for a debriefing. The debriefing is normally scheduled within 72 hours of the incident; however, many factors can affect this timeline. The debriefing will be voluntary. Employees not directly connected to the incident, but feel attendance may be beneficial to them, may participate with approval of their supervisor and the facilitator of the debriefing. Their attendance is not compensable. The Public Safety Chief must be informed of all PST debriefings. If a specific incident causes a conflict of interest for any PST Team member, that member is excused from participation in any subsequent debriefing or other PST support intervention.
- H. Request for PST Member: In the event an employee directly involved in a traumatic incident requests a particular PST member, supervisors shall make every reasonable effort to release the requested PST member from their current assignment so they may provide peer support to the involved employee.

I. PST Referrals:

Self-referral: Any employee may request PST assistance for personal or professional matters.

Supervisor referral: Supervisors may recommend that personnel under their direct supervision contact the PST clinical advisor, the PST Team coordinator, or any member of PST for assistance with a perceived difficulty or stressful circumstance. In such cases, contact is voluntary. Supervisory recommendations do not constitute a supervisory order. Supervisors shall not order a subordinate to contact a member of the PST for the purposes of peer support.

Reach-out program: PST members may engage in proactive personal contact in an effort to assist any person with a perceived difficulty or stressful circumstance. Any follow-up or ongoing PST support with the recipient of a proactive PST contact will be provided as appropriate.

- J. Administrative Investigations: Employees involved in any type of administrative investigation, including internal investigations and supervisory inquiries, who wish assistance in dealing with the stress inherent in such investigations, may contact the PST clinical advisor or uninvolved members of the PST for support and assistance.

203.04 Peer Support Roles

A. Peer Support Members

Members of the Peer Support Team committed to functioning within the parameters of their peer support training. Appointment to the Peer Support Team is a collateral assignment.

B. Clinical Advisor

The Peer Support Team is clinically supervised by a department-appointed, licensed, mental health professional. This person is designated the "Clinical Advisor." The Clinical Advisor is responsible for the clinical supervision and the ongoing in-service training of the PST.

C. Team Coordinators

The PST Coordinator is appointed by the Public Safety Chief. The coordinator is the primary spokesperson for the PST and represents them in matters involving department staff, agency, and interagency issues. The PST coordinator is administratively responsible for the PST's operational status. The coordinator and the Clinical Advisor function as co-chairpersons during PST Team meetings.

Assistant Team Coordinator(s) will be selected in compliance with department policy. Assistant Team Coordinators assist the Coordinator and Clinical Advisor in the performance of their duties, and function as the PST coordinator in the absence of the coordinator. An acting coordinator will be appointed by the team coordinator during periods of absence of the coordinator and assistant coordinators.

203.05 Primary Obligations of Peer Support Team Members

A. Professional Supervision

Peer Support Team members may communicate their peer support activities to the PST Clinical Advisor unless it is requested by the person receiving peer support services that the interaction not be shared with the Clinical Advisor. Peer Support Team member activity may be communicated at regularly scheduled meetings. In circumstances where this is not the case, team member activity may be communicated to the Clinical Advisor as soon as practical.

If the information pertaining to a PST member's peer support activity is assessed by the member as inappropriate for discussion in a regularly scheduled meeting, the PST member should arrange to discuss the interaction(s) with the Clinical Advisor privately.

B. Confidentiality

Issues discussed during peer support are confidential within the parameters specified by law, department policy, and professional supervision. Safeguarding acquired information is a primary obligation of Team members. Subject to disclosures required by law, information received in confidence shall not be revealed without the express consent of the person involved. Express consent to reveal information constitutes a written waiver of confidentiality. In cases where express consent is granted, information will be provided only to those specifically authorized to receive the information.

Team members must advise all persons with whom they interact in a peer support role of the limitations of Peer Support Team member confidentiality.

In the event that information received in a peer support interaction must be revealed by reason of law, PST members shall reveal such information only after an effort to elicit the person's voluntary disclosure has failed. In cases where it is appropriate, the Peer Support Team member should inform the person of the obligatory actions necessary. Information revealed under such circumstances shall be provided only to the appropriate persons and/or public authorities.

In the unlikely event that a PST member receives information during a peer support interaction that there is a viable threat of violence toward another person or persons, a "duty to warn" exists. This information is not confidential. The PST member must warn the threatened person(s), contact the team coordinator or clinical advisor immediately, the on-duty watch commander, and take any other actions deemed appropriate for the circumstances.

C. Scheduled Meetings

Attending scheduled PST meetings for the purpose of Team clinical supervision and team cohesiveness is a primary obligation of all PST members. The Peer Support Team meets monthly to allow for clinical supervision, on-going training, and Team cohesion. PST members endeavor to attend at least eight (8) monthly meetings each year. If a Team member is unable to attend a scheduled monthly meeting, he or she must:

1. Notify the Team Coordinator or an Assistant Coordinator in advance of the meeting when possible or contact the Coordinator or assistant coordinator as soon as practical after the scheduled meeting, and
2. Schedule an individual supervision meeting or otherwise contact the Clinical Advisor if he or she has engaged in any PST interactions since the previous supervisory contact.

Excessive absences from the PST monthly meetings and training will be addressed by the Team Coordinator, Assistant Coordinators, and the Clinical Advisor on an individual basis.

D. Duty to Take Action

Peace officer members of the PST are required to make an arrest in cases where there is probable cause that a crime has been committed within a domestic relationship (C.R.S. 18-6-803.6). Peace officer members and other PST members who are mandatory reporters must also take action in cases of actual or suspected child abuse or neglect.

E. Clarification of Peer Support Interactions

Due to the fact that Peer Support Team members function in multiple roles within the Department, team members are responsible for clarifying the role in which they are functioning when interacting with others. PST members will not take any notes or recordings of any kind during peer support interactions.

F. Availability for Call-Out

The Peer Support Team will provide communications with a list of team members. In the event that PST support or intervention is requested Communications will contact the team coordinator. If the team Coordinator is unavailable or does not respond to a page within a reasonable amount of time, an Assistant Coordinator will be contacted or paged. The Coordinator or Assistant Coordinator contacted will assess the circumstances and arrange for appropriate PST intervention.

In the event that the PST Coordinator and Assistant Coordinators cannot be contacted, Communications will continue to call team members in the order listed until a team

member is contacted. The team member contacted will then act as coordinator. This team member will assess the circumstances and arrange for appropriate PST intervention.

G. Compensation

Peer Support Team members do not maintain a paid “on-call” status. Therefore, PTG members are not eligible for on-call compensation. Peer Support Team members who are called out or otherwise function in their PST status during off-duty hours will be compensated appropriately.

Employees who receive PST support while on duty will be compensated with on duty time. Employees who receive PST support off duty are not compensated as it is a voluntary service.

H. Debriefing and Debriefing Process

The PST may schedule and facilitate incident debriefings when appropriate. Various debriefing protocols may be utilized depending upon the actual circumstances of the incident to be debriefed. Team members recognize the debriefing process is dynamic. PST members will remain flexible and facilitate debriefings in a manner which best meet the perceived needs of participants.

When appropriate and upon approval of the Clinical Advisor, Team Coordinator, and Assistant Coordinator, or the Public Safety Chief or designee, PST members may facilitate debriefings without the presence of the Clinical Advisor. In such cases, the “Peer Support Team Limits of Confidentiality Debriefing Statement” must be read prior to the start of the debriefing.

Team members may invite persons not directly involved in the incident to attend a debriefing if it is thought the persons invited can positively contribute or benefit from the debriefing process. All such invitations must be approved by the Clinical Advisor, Team Coordinator, or an Assistant Coordinator.

Debriefing participants may be accompanied by a support person(s). Support persons may attend debriefings if their participation is not prohibited by other sections of this policy.

I. Media

Right Media representatives are prohibited from attending debriefings. Any information released to the media will be provided by the Department PIO or designee. Allowing a violation of this provision is a serious breach of trust and is cause for removal of the member from the Peer Support Team.

J. Attorneys

Attorneys are not allowed to attend debriefings.

K. Outside Agencies

The Peer Support Team's primary function is to provide peer support services to Department personnel and their families. However, the PST may be utilized to assist outside agencies. The PST works and cooperates with other Peer Support Teams as specified by mutual aid policies and/or at the discretion of the Public Safety Chief or designee.

L. Referral to Professional Counseling Services

Peer Support Team members may find it appropriate to inform those involved in peer support interactions of available options for professional counseling services. In such circumstances, available options include the Employee Assistance Program, community private practitioners, and other various professional helping agencies within the community. It may also be appropriate to refer those involved in peer support to other specialized sources including but not limited to attorneys and financial advisors.

M. Reach Out Program

Peer Support Team members may engage in a "Reach Out." In Reach Out, a PST member initiates contact with a person who has been exposed to a traumatic incident, a stressful life event, or another known or suspected stressor.

Intervention following a Reach Out, if necessary, may include continued peer support, debriefing, and/or referral to professional services.

N. Leave of absence

Peer Support Team members may request a leave of absence from PST responsibilities for up to one year. A request for a leave of absence must be submitted in writing to the Team Coordinator, or the Clinical Advisor. The request must specify the length of requested absence. During a leave of absence, the PST member may attend monthly or otherwise scheduled PST training.

O. Resignation from the Team

Peer Support Team members may resign from the Team at any time by submitting a written resignation to the Team Coordinator. Any Team member resigning must be certain that all ongoing peer support interactions are appropriately terminated, referred to other Team members, or referred to professional counseling sources.

P Removal from the Team

The Team Coordinator in consultation with the Clinical Advisor may request that the Public Safety Chief remove from the Peer Support Team any member who has acted in a manner inconsistent with law, departmental policy, or the PST Operational Guidelines. Such a request may also be presented in any other circumstances wherein a Team member has acted in a manner which undermines the credibility or fundamental ethical principles of the Peer Support Team.

Q. Compliance with the Peer Support Team Operation Guidelines

The Peer Support Team and its members are required by policy to function in compliance with the department approved Peer Support Team Operational Guidelines: