
 <p>Corrections and Community Supervision</p> <p>DIRECTIVE</p>	<p>TITLE</p> <p>Critical Incident Stress Management Plan</p>		<p>NO. 4026</p>
			<p>DATE 05/12/2020</p>
<p>SUPERSEDES</p> <p>DIR# 4026 Dtd. 03/22/19</p>	<p>DISTRIBUTION</p> <p>A</p>	<p>PAGES</p> <p>PAGE 1 OF 3</p>	<p>DATE LAST REVISED</p>
<p>REFERENCES (Include but are not limited to)</p> <p>ACA Expected Practices 4-4225-1, 4-4373, 4-APPFS-3G-04, 1-ABC-3B-15, 1-ABC-4E-42, 5-ACI-3B-16, 5-ACI-6A-35</p>	<p>APPROVING AUTHORITY</p> 		

I. BACKGROUND: Persons who experience, witness, or are confronted with a critical incident that is an unusual incident or other event that involves actual or threatened death or serious injury, or threat to the physical integrity of self or others, may experience short and/or long-term consequences of critical incident stress. Such incidents may include, but are not limited to:

- A fatal or serious injury to an employee
- A captive or hostage situation
- Use of force that results in serious injury or death
- Sexual assault
- A sudden and/or unexpected event with the potential for serious injury, accidental or violent death
- Suicide

The short or long-term consequences of critical incident stress can include health problems, psychological problems, and difficulties in a person's personal and professional life. This traumatic stress and its consequences can be minimized with appropriate, timely intervention. The purpose of Critical Incident Stress Management (CISM) is to preserve the health and careers of the individuals exposed to critical incidents, described above, by minimizing or preventing work-related critical incident stress and its consequences, and identifying individuals who need professional mental health follow-up.

This directive establishes procedures to respond to, support, and assist employees exposed to critical incidents as described above. These are applicable to all employees of the Department of Corrections and Community Supervision (DOCCS) acting in their official capacities and all critical incidents to which they are exposed and shall augment, not replace, any available services otherwise requested by the employee through the Employee Assistance Program (EAP).

II. POLICY

A. CISM Teams

1. It is the policy of DOCCS to maintain CISM teams in each HUB. These teams shall be comprised of mental health professionals, uniformed and non-uniformed staff, and shall be organized and trained under the auspices of the Associate Commissioner for Mental Health. Coordination and training of these teams shall be the responsibility of the Central Office CISM Coordinator.

- Individuals are eligible for training and appointment to a team on recommendation of their Superintendent or Regional Director and are only eligible for deployment after having completed the DOCCS basic CISM training. Individuals must submit a letter of interest indicating their merit to provide CISM, to their Superintendent or Regional Director and may be required to interview with appointed designee(s) of the DOCCS Bureau of Mental Health. Final approval of CISM team members is at the discretion of the Central Office CISM Coordinator or designee.
2. Team members shall implement intervention strategies and programs designed to assist personnel in managing and recovering from traumatic stress encountered as a result of critical incidents. Procedures may include structured group sessions, individual consultations, peer support, informational/educational presentations, follow-up services, and other components of a comprehensive CISM program.
 3. Upon request, DOCCS may also assist other State agencies by implementing and coordinating the delivery of CISM services as a result of critical incidents.

B. Facility Designations

1. The Superintendent or Regional Director is responsible for consulting with the Associate Commissioner of Mental Health or designee about the need for CISM services.
2. The Superintendent or Regional Director shall designate staff members to serve as CISM Liaisons and Assistant CISM Liaisons. The CISM Liaison and/or Assistant CISM Liaison shall assist in planning and coordinating response activities, and shall make arrangements (accommodations, meeting place, supplies, and coordination with staff, EAP, and other local resources) for those deployed to provide CISM services.

C. Deployment

1. When requested, CISM deployment shall be arranged without unnecessary delay and shall be independent of other debriefings, reports, critiques, etc., which normally take place after an incident.
2. Deployment of CISM will not interfere with general operations or any appropriate responses to the incident, except that the duties or work of involved personnel will be rescheduled or excused so that they may participate in CISM activities.

III. PROCEDURES

- A. Support for Involved Employees: The Superintendent, Regional Director, Community Supervision Area Supervisor, or designee will determine the need to arrange support for involved employees. This may include accompanying them home or to necessary medical services, communicating with family or other persons and resources as requested, and assisting them to use other resources which may be available through EAP, their specific bargaining union, etc. If deemed appropriate, a staff member having experienced a Critical Incident may be temporarily reassigned to another duty/area.
- B. Assessment of Need for CISM Services: The Superintendent, Regional Director, or designee will determine, based on the degree of trauma and the severity of the incident, whether to request CISM services.

The Superintendent, Regional Director, or designee may want to consult with his or her Executive Team members, Community Supervision Area Supervisor, CISM Liaison and/or Assistant CISM Liaison, union leaders, EAP Coordinator, Chaplains, or any other staff deemed appropriate. The Superintendent, Regional Director, or designee can utilize trained CISM team members at their facility/bureau to talk with staff regarding the critical incident.

If the need for CISM services is indicated, the Superintendent, Regional Director, or designee will contact the Central Office CISM Coordinator via email or telephone during regular work hours Monday through Friday 8 AM to 4 PM or through the Communications Control Center (CCC) after hours and weekends.

- C. Deployment of CISM Team Members: When a Superintendent, Regional Director, or designee requests CISM services, Central Office CISM Coordinator or designee will deploy or direct a CISM HUB Team Coordinator or Assistant Coordinator to assemble and deploy a CISM team or team members.

As directed by the CISM Clinical Coordinator, the Facility CISM Liaison and/or Assistant Facility CISM Liaison will arrange for a thorough briefing of the deployed CISM team on the incident and attendant circumstances, contact and offer CISM services to all involved employees, and coordinate arrangements so that the team has all necessary information to follow protocol in providing CISM services.

The deployed team will provide CISM services, including critical incident stress debriefing, as needed.

IV. CRITICAL INCIDENT STRESS DEBRIEFING: When critical incident stress debriefing is indicated, every effort will be made to schedule sessions to occur within 24 to 72 hours after the incident. The following are guidelines for the debriefing:

- A. CISM debriefings are individual and group sessions are conducted by appointed CISM team members;
- B. All involved employees will be strongly encouraged to attend. Attendance is not mandatory and does not involve charging time or receiving overtime;
- C. CISM team members will be dressed casually, but professionally (no uniforms). Participating employees will be asked to attend in civilian clothes;
- D. Attendees will have pagers and cell phones, etc., off to minimize interruptions;
- E. Sessions are structured to allow staff to feel they can speak freely;
- F. As needed, CISM team members will contact involved employees to offer CISM services and encourage using follow-up services;
- G. All conversations between CISM team members and exposed employees shall be strictly confidential;
- H. EAP will be available for contact when a CISM debriefing (group) session ends; and
- I. Every effort will be made to coordinate with EAP and ensure that appropriate follow-up services are available.