

Prince William County Police Department Peer Support Team Guidelines



Introduction

There are several factors that influence the stress encountered by police personnel: the inherent threat of the job, the losses they routinely witness, the difficult decisions they have to make, and the cumulative demands of the job. Additionally, personal issues arising from home and family stressors can result in police personnel juggling many competing demands in a job where the stakes are high if mistakes are made. Most police professionals face these issues at different times, but when any combination of them weighs on the individual, stress reactions can result. Therefore, the Prince William County Police Department endorses the need for a Peer Support Team to offer support to employees to prevent the progression of stress reactions or bridge the individual to other resources.

This handbook has three specific objectives:

- To provide an understanding of the purpose of the Department's Peer Support Team.
- To provide guidelines for oversight and management of the program.
- To provide operational guidelines and expectations for the Peer Support Team members.

As the Peer Support Team evolves, policy and procedural changes will be made to meet the needs of the organization and employees. The goal of the team is to ensure that employees receive the best support possible to enhance their overall sense of well-being.

Mission Statement

The mission of the Prince William County Police Department Peer Support Team is to provide a safe, non-judgmental and confidential environment where members can engage in a supportive conversation with a trained peer.

Purpose

The Peer Support Team offers confidential assistance and appropriate support resources to employees when situations negatively affect them, their work performance, or immediate family. This assistance is confidential, providing it does not violate any law or department regulation. The services are designed to:

- Support employees and/or their immediate family members during times of personal or professional crisis/tragedy/significant illness.
- Promote trust and preserve confidentiality for all employees who utilize the Peer Support Team.

Peer Support Team Coordinator

The Peer Support Team Coordinator acts as a primary liaison between the Peer Support Team Members and Administration of the Police Department. The Peer Support Team Coordinator is responsible for ensuring that all Peer Team Members receive proper training and are prepared to address each situation and event to which they are deployed. The Peer Support Team Coordinator will coordinate all trainings and activate peers to make contacts and follow-up. The Peer Support Team Coordinator is responsible to make sure that all referrals are handled appropriately.

Specific Duties Include:

- Oversight of the Peer Support Team
- Recruit and coordinate the screening process for Peer Support applicants
- Coordinate training for new Peer Support Team Members
- Provide supervision and direction to Peer Support Team Members
- Coordinate continuing education for the Peer Support Team
- Strive to continually stay current of supportive education related to Stress First Aid
- Oversee the selection process
- Maintain statistical data on reported contacts and services provided by Peer Support Team Members
- Maintain other necessary Peer Support Team documentation

The Peer Support Team Coordinator is responsible for the following documentation:

- Activity log documenting all Peer Support Team responses/activities
- A training log that includes the following:
- Attendance of Peer Support Team Members:
 - The date and time of the training
 - The training topic
- Record of additional trainings attended by Peer Support Team Members
- Minutes and agendas for each meeting
- Attendance roster for each meeting

Clinical Director

A Virginia licensed Behavioral Health Specialist, with the Prince William County Public Safety Resilience Center, will oversee the clinical direction of the Peer Support Team. This will be provided in consultation with the Peer Team Coordinator. The Clinical Director and the Peer Team Coordinator are responsible for ensuring that all Peer Team Members are properly trained and prepared to address each situation and event to which they are deployed.

Role of Peer Support Team Members

The Peer Support Team provides support and assistance to individuals who are experiencing a stress injury or crisis. Peer Support Team Member responsibilities are as follows:

- Assure confidentiality within guidelines to employees who seek assistance from the Peer Support Team.
- Attend the Peer Support Team quarterly meetings.
- Attend required training on Stress First Aid for Law Enforcement Personnel.
- Attend ongoing training on emerging topics.
- Provide assistance and support to employees on an as needed basis.
- Assist individuals in distress by referring them to appropriate resources when necessary.
- Provide follow-up support to individuals contacted.
- Respond if practical, at any hour.

The Peer Support Team members are not exempt from federal, state, local laws, or the rules and regulations of the Prince William County Police Department. When necessary, contact the Peer Support Program Coordinator for assistance and guidance.

Peer Support Team Activation

It shall be the responsibility of the Incident Commander or Watch Commander on the scene to notify a peer team representative for the following types of incidents:

- Any police shooting.
- Any departmental response to a serious injury or death of a member.
- Suicide of a member.
- When any member's actions or use of force results in a death or serious physical injury.
- Any mass casualty incident (i.e., plane, train, bus crash, etc.).
- All Civil Disturbance Team call-outs.
- Prolonged search/rescue incidents, to include extended Underwater Search and Recovery Team deployments.
- Any other time deemed necessary by the Incident Commander:
 - a. Death of, injury to, or violence to a child.
 - b. Incidents that attract extremely unusual or critical news media coverage.
 - c. Any incident that has unusually high personal risk to members.
 - d. SWAT call-outs that are prolonged or at the discretion of the Incident Commander (excepting Vice/Narcotics raids).

Once activated, it shall be the responsibility of the Team Coordinator to brief all team members and to plan the level of support offered for members involved in a critical incident and to coordinate this plan with the Clinical Director. Any Team member involved in the incident shall not serve in the capacity of a Peer Support member for that incident.

Team members should focus their efforts on providing support to members of this Department. There may be times other law enforcement agencies request assistance from our Peer Support Team. The decision to assist other agencies will need to be approved by the Chief of Police, or designee. Once approval is obtained, members of the Peer Support Team may be deployed to the requesting agency. If members of the public, including witnesses, need assistance, the Team should consider calling out the Police Chaplain or the Victim Witness Assistance program for assistance.

The Police Chaplains are available to assist the Peer Support Team or other Department members during a critical incident. The Wellness & Resiliency Unit Supervisor will maintain communication with the Peer Team Coordinator for incidents that may need the resources of both groups.

Peer Support Selection Process

When a vacancy occurs on the Peer Support Team, any interested employee who would like to be considered must submit their application to the Peer Support Team Coordinator. Vacancies of Peer Support Team Members will be filled on an as needed basis.

Prospective Peer Support Team Members must meet the following criteria:

- Agree to maintain confidentiality within the guidelines provided in this handbook.
- Practice empathy and possess interpersonal and communication skills.
- Be motivated and willing to manage time effectively to allow minimal impact on their normal duties.
- Must be in good standing within the Department.
- Must attend an interview with the Peer Support Team Coordinator, Clinical Director (Prince William Public Safety Resilience Center Behavioral Health Specialist) and a member/s of the Peer Team (**Form A**).
- Must attend and successfully complete Stress First Aid training.

Peer Support Training Program

Training will be coordinated by the Department's Peer Support Team Coordinator and Behavioral Health Specialist. The major emphasis will focus on skill development for providing peer assistance. The basic required training includes:

1. Group Process Training
2. Suicide Intervention/Postvention Training
3. Stress First Aid Training (Peer to Peer)

Follow-up training and workshops will be scheduled to enhance peer support skills, provide group sharing, and allow an exchange of experiences. Peer Support Team Members may voluntarily withdraw from participation at any time by notifying the Peer Support Team Coordinator.

Confidentiality

The success of the Prince William County Police Department Peer Support Team depends on the observance of confidentiality. It is imperative that each Peer Support Team Member maintains strict confidentiality of all information learned about an individual. Communication between the Peer Support Team Member and an individual is considered confidential except for situations involving the following:

- Danger to self
- Danger to others
- Suspected child/elderly abuse
- Domestic violence
- Requested by the individual receiving peer support services

- Peer Support Team Members are to inform the individual, prior to discussion, what the limitations and exceptions are regarding the information revealed. In those cases where a concern or a question regarding confidentiality arises, the Peer Support Team Member must immediately contact the Peer Support Team Coordinator for assistance.

- If any individual is behaving in an unsafe manner or stating that they are a danger to themselves or others (ex: suicidal, homicidal or violent), the Peer Support Member will contact the individual's direct supervisor, the Public Safety Resilience Center and/or 911.

- Peer Visit Tracking (Form B): All Peers will complete a tracking form, after each contact and submit it to the Peer Team Coordinator within in 7 business days. This form maintains complete anonymity of the member. It is a statistical tracking form to determine the number of contacts and services provided by the Peer Support Team only.

- All Peers will review and sign a confidentiality agreement prior to meeting with members (**Form C**).

Internal Investigations / Discipline

The Peer Support Team Member's role in disciplinary situations is be one of support with a focus on assisting individuals with the stress they may face during the disciplinary process. If Peer Support Team Members have any questions or concerns regarding these situations, they will consult with the Program Support Team Coordinator for assistance.

If a Peer Support Team member is assisting an individual who is or becomes the subject of a disciplinary investigation, the Peer Support Team Member will be guided by the confidentiality policy of the Peer Support Team. S/He will not volunteer any information received in confidence. The Peer Support Team Member shall not impede the actual investigation nor attempt to shelter the individual from the investigation.

Revocation/Suspension of Membership

Membership is revocable at the discretion of the Peer Support Team Coordinator. Action is appropriate for, but not limited to the following:

- Failure to maintain strict confidentiality regarding Peer Support response, including topics discussed and personnel involved.
- Failure to follow all local protocols and directives regarding Team activity.
- Organizing or attempting to organize any Peer Support services without the Peer Support Team Coordinator's knowledge or approval.
- Going to the scene or place of an incident to act on behalf of the Peer Support Team without prior knowledge or consent of the Peer Support Team Coordinator.
- Failure to attend **at least two** team meetings or required training/s per year.
- Acting against the expressed direction of the Peer Support Team Coordinator.
- Any situation where a member is unable to objectively perform the duties of a Peer Support Team Member.

It is understood that a Member may wish to be removed from the Peer Support Team due to various personal or professional reasons. In order to voluntarily suspend membership, the Peer Support Team Member is required to make the request to the Peer Support Team Coordinator in writing.

Peer Support Team – Roster

Team Coordinator: Nicole DelVecchio

Name	Personal Cell	Work Cell	Assignment
Richard Alicea	813-335-6276	571-435-7385	A - Central
Kelly Anderson	703-298-0018	571-247-1319	E-East
Richmond Appau	703-928-7463	571-722-7144	C-Central
Machelle Bailey	540-522-5560	571-436-0175	PIO / Media Relations
Adam Beard	330-591-5428	571-492-8385	Co-Responder Unit
Eric Beard	330-421-5749	571-358-0837	CID- Special Victims
Kara Bonkoski	703-217-2716	703-864-5109	Finance
Patty Clary	703-887-7579	571-368-9062	Office of the Chief
Nicole DelVecchio	804-874-2518	571-722-8115	CID – Special Victims
David Ehrhardt	703-856-4371	571-722-7007	A-Central
Adam Gardiner	703-309-5509	571-379-0215	Co-Responder Unit
Kenneth Jenkins	215-740-4303	571-343-0155	SIB – Street Crimes
Bill Kiefer	703-203-4466	571-343-0041	SRO – Reagan MS
George Kimball	540-907-2395	571-343-0151	D-West
Stephen Kuhn	315-749-8395	571-991-0359	E- West
Ian Mack	703-254-4830	5712849628	Missing Persons Unit
Brian McCleese	540-846-4236	571-492-1172	CID - Special Victims
Truman Paul	540-409-1270	571-343-0076	Community Liaison
Sean Shelton	703-927-6584	571-247-3437	Professional Standards
Kristin Sheldon	703-980-1454	703-585-8679	SRO – Battlefield HS
Heather Vance	571-334-7094	571-221-8442	A - Central

4-29-2021

Form A

Prince William County
Police Department

Peer Support Program Questionnaire



Contact Information

Name and Rank	
Home Street Address	
City/ State/ Zip Code	
Home Phone	
Cell & Work Phone	
E-Mail Address	

Availability

During which hours are you available for volunteer assignments?

Weekday

___ mornings
___ afternoons
___ evenings

Weekend

___ mornings
___ afternoons
___ evenings

Interests

Why do you want to become a Peer Support Member?

Expectations

What are your expectations in being a Peer Support Member?

Are you in good standing with the Department? Yes _____ No _____ (If no, please explain)

Special Skills and Qualifications

Summarize special skills and qualifications in helping others that you have acquired from employment, previous volunteer work, or through other activities

Previous Volunteer Experience

Summarize your previous volunteer experience.

Explain what Confidentiality means to you?

Agreement and Signature

By submitting this application, I affirm that the facts set forth are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

Name (printed)	
Signature	
Date	

***Thank you for completing this application form and for your interest in volunteering. All applicants will be interviewed before final selection of the Peer Support Team. Please send the completed questionnaire to First Sergeant Nicole K. DelVecchio, PWCPD, 5036 Davis Ford Road, Woodbridge, Virginia 22192 or Inter-Office Mail at Central District Station.

FORM B



Peer Visit Tracking Form

Peer Counselor(s): _____

Date: _____ Unit(s)/Location: _____

Division: _____ # of Participants: _____

Circle SFA Action/s used:

Check Coordinate Cover Calm Connect Competence Confidence

Briefly explain:

TOPICS COVERED:

- Behavioral Health Resources reviewed**
- Primary Concerns of Member/s: (check if applicable)**

____ Family Issues (*specify*): ____ Marriage/Relationship ____ Children
 ____ Family Stress ____ Other, Specify: _____
 ____ Substance Abuse ____ Health Concerns ____ Financial Issues
 ____ Retirement ____ Current Firehouse Issues
 ____ Other (*specify*) _____

- Provided Information On: (check if applicable)**

____ Substance Abuse ____ PTSD ____ Grief/Bereavement
 ____ Trauma ____ Other, Specify: _____

- Responded to Emergency:**

- Follow-up Needed:**

Additional Remarks If Needed:

Form C

CONFIDENTIALITY AGREEMENT

All Peer Support Team members will **maintain confidentiality** to ensure the integrity of the program.

1. All Peer Support contacts are confidential. There are no records kept identifying members who utilize Peer Support.
2. Peer Support Team Members **SHALL NOT** discuss information obtained while acting in a Peer Support capacity, with anyone, unless there is a concern for their safety or the safety of others. Peer Support Members may consult with the Clinical Director or a member of the Public Safety Resilience Center for the purpose of behavioral health support.
3. Peer Support Team Members **SHALL NOT** divulge **ANY** shared information with other employees, family members, friends, supervisors, management or the general public.
4. Prior to meeting with a member, it is the responsibility of the Peer Support Team Member to clearly identify the exceptions to confidentiality and explain that any concerns related to safety cannot be held confidential.
5. If any Peer Team Member fails to strictly adhere to the confidentiality agreement, the Team Member will be removed immediately by the Peer Coordinator. There will be no future reinstatement.

With my signature below, I affirm that I have read and understand the Confidentiality Agreement. I agree to comply with the above policies and will cooperate in their implementation.

Signature _____ Date _____

Printed Name _____

Rank _____ Assignment _____