It is the policy of this department to provide support to employees involved in stressful incidents, and to ensure that any post-incident effects on job performance are identified and alleviated.

Police employees and other emergency employees may experience psychological discomfort and problems as a result of their involvement in major disasters, shootings or other emergency events. Critical Incident Stress Management (CISM) is intended to assist employees in coping with both personal and job-related effects of what they have experienced. The emphasis throughout the program is to prevent, recognize and alleviate stress before it affects the health, safety, personal lives and job performance of those who perform the demanding work of emergency services.

In recognition of the need for support to emergency workers, the Virginia Division of Emergency Medical Services (EMS) has established CISM programs throughout the state. The Emergency Medical Services director, Alexandria Fire Department, coordinates Alexandria’s CISM program. The program director/lead mental health clinician is from the staff of Alexandria’s Mental Health, Mental Retardation and Substance Abuse Department.
The Police Department’s participation in CISM is led by the Police CISM coordinator, designated by the police chief, and is carried out by trained peer debriefers. A mental health clinician is available for consultation and leads team debriefings. As part of the CISM program, employees may be referred to the Employee Assistance Program, Chaplain Program or other follow-up.

Stress is a very normal reaction to highly abnormal events. Officers, call takers, dispatchers and others involved in stressful incidents are encouraged to take full advantage of the CISM program.

### 4.5.03 DEFINITIONS

**CISM Team** – Critical Incident Stress Management Team composed of a peer debriefer(s) and a mental health professional, who is the team leader.

**Debriefing** – Private discussion of experiences and after-effects related to critical incidents; intended to provide support and an outlet for views and feelings associated with a stressful incident. Debriefing is not counseling.

**Individual Debriefing** – Private discussion between a peer debriefer and an employee involved in an incident. In some cases, individual debriefings are offered by a mental health clinician.

**Peer Debriefer** – An employee trained to understand and discuss post-incident stress. (Other city agencies also have trained peer debriefers.)

**Team Debriefing** – Private discussion among police employees and/or other emergency services employees involved in the same incident, peer debriefers and a mental health professional.

### 4.5.04 RESPONSIBILITIES AND PROCEDURES

A. **General:** Employees experiencing post-incident stress may initiate contact with a peer debriefer at any time.

   1. Debriefing procedures will be activated when the following types of stressful incidents occur:
      a. Shootings;
      b. Serious injury to police employee;
      c. Death or serious injury to children;
      d. Violent death;
      e. Mass casualties;
      f. Hostage/Barricade incidents; and
g. Other incidents as determined by a supervisor, commander or peer debriefer.

2. In cases of shooting or serious violent injury to a police employee, the employee must participate in debriefing with a mental health professional before returning to duty.

3. Any employee whose action(s) or use of force in an official capacity results in death or serious physical injury, will be removed from line-duty assignment pending an administrative review. The purpose of this action is to relieve the employee of the burdensome responsibility of effectively discharging his duties under the stressful conditions which accompany such a serious incident. [1.3.8]

B. **Communications Staff:** Communications will maintain an up-to-date list of trained police peer debriefers and their current assignments.

C. **Supervisors:** The supervisor of any police employee involved in a stressful incident will notify a police peer debriefer within 24 hours of the incident, giving information about the incident and what employees were involved.

   1. Supervisors should remain alert to possible after-effects of involvement in a stressful incident and, where appropriate, notify a police peer debriefer.

D. **Peer Debriefers:** The peer debriefer notified will quickly contact the employee(s) involved in the incident. Following the initial contact, the peer debriefer will consult with the police CISM coordinator to determine what type of debriefing, if any, is appropriate.

   1. Peer debriefers will follow-up with the supervisor and/or employee involved 30 days after a critical incident to ensure that any prolonged or delayed difficulties are addressed with appropriate debriefing or referral. When additional follow-up is needed, peer debriefers will take the necessary steps to plan and schedule the follow-up.

   2. Peer debriefers are to consult and rely on the lead mental health clinician whenever mental health expertise is needed; and are to refrain from making independent decisions requiring such expertise.

   3. Except as necessary to carry out the CISM program, peer debriefers are to keep confidential any personal information revealed to them in contacts or debriefings. Peer debriefers will keep the police CISM Coordinator informed of the number and type of contacts they make.

   4. **No CISM member should be ordered to divulge confidential information to Internal Investigations or to anyone within or outside the Police Department.**
E. **Police CISM Coordinator:** The police CISM Coordinator will coordinate CISM training and activities within the department, including arranging debriefings; and for advising the Communications supervisor of the names, schedules and contact information of the peer debriefers and of the lead mental health clinician.

**By Authority Of:**

David P. Baker  
Chief of Police