
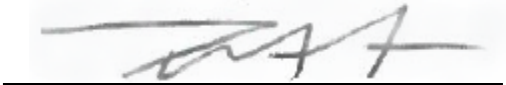


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<b>POLICY NUMBER: 4.7</b>		
<b>CHAPTER 4: TRAINING AND STAFF DEVELOPMENT</b>		
	<b>STATE of MAINE</b> <b>DEPARTMENT of CORRECTIONS</b>  <b>Approved by Commissioner:</b> 	<b>PROFESSIONAL STANDARDS:</b>  <b>See Section VIII</b>
<b>EFFECTIVE DATE:</b> May 9, 2000	<b>LATEST REVISION:</b> January 11, 2022	<b>CHECK ONLY IF</b> APA [ <input type="checkbox"/> ]

## I. AUTHORITY

The Commissioner of Corrections adopts this policy pursuant to the authority contained in 34-A M.R.S.A. Section 1403.

## II. APPLICABILITY

Adult and Juvenile Facilities

## III. POLICY

The Department recognizes the importance for staff to have support for stressful personal, professional, and work situations that impact the work environment. It is the policy of the Department of Corrections to maintain a Peer Support Program using a holistic wellness approach to assist staff in these stressful situations. In addition, critical incident stress management (CISM) is provided to staff affected by a critical incident.

## IV. DEFINITIONS

1. Critical Incident Stress Management (CISM) peer support – services and support provided to staff when that person has been involved in a critical incident that can reasonably have a devastating, long-lasting effect on that person. Critical incident stress management peer support includes assisting staff to appropriately process the trauma and stress and connecting that person to appropriate resources.
2. Holistic wellness - attends to the physical, emotional, intellectual, occupational as well as mental wellness of the whole person. This is independent of trauma experienced in a critical incident which may require critical incident stress management (CISM).
3. Peer Support Team - trained staff who provide support to their fellow staff experiencing stress or problems that impact the workplace.
4. Staff - for purposes of this policy, Department employee or a person in a facility providing services to an adult resident or a juvenile resident by agreement with or

under contract with the Department (e.g., facility health care staff), but not including a volunteer, student intern, delivery person, etc.

## V. CONTENTS

- Procedure A: Peer Support Teams, General
- Procedure B: Critical Incident Stress Management (CISM)
- Procedure C: Work-Related Personal Trauma
- Procedure D: Training
- Procedure E: Confidentiality
- Procedure F: Holistic Wellness

## VI. ATTACHMENTS

Attachment A: [Peer Support Team Member Nomination Form](#)

## VII. PROCEDURES

### Procedure A: Peer Support Teams, General

1. The Department's Peer Support Program is offered in addition to and not as a substitute for the State's Living Resources Program, formerly known as the Employee Assistance Program (EAP) or private counseling.
2. Each facility Chief Administrative Officer, or designee, shall establish and maintain a facility Peer Support Team. Depending upon the needs and of the size of the facility, the team shall consist of a minimum of five (5) members and may have as many as twenty-five (25) members.
3. Each Chief Administrative Officer, or designee, shall designate a facility employee to be the Peer Support Team Coordinator and may designate a facility employee to be the Assistant Peer Support Team Coordinator.
4. The Chief Administrative Officer, or designee, shall provide general direction to the Peer Support Team Coordinator concerning the operation of the Peer Support Team.
5. The facility Peer Support Team Coordinator shall survey facility staff for their recommendations of nominees for the Peer Support Team and then determine if the staff recommended are willing to serve on the Peer Support Team.
6. In addition, staff may nominate staff for the Peer Support Team by submitting a completed a Peer Support Team Member Nomination Form (Attachment A) to the Peer Support Team Coordinator. The Peer Support Team Coordinator shall then determine if the recommended staff is willing to serve on the Peer Support Team.
7. The names of recommended staff who agree to serve on the Peer Support Team shall be submitted to the facility Chief Administrative Officer, or designee, for final selection. In addition, the Chief Administrative Officer, or designee, may invite staff who provide services under contract to or by agreement with the Department to be members.

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8. Each facility Peer Support Team Coordinator shall ask team members annually if they wish to remain on the team.
9. Staff accepting appointment may remain a team member as long as the employee is willing to serve unless removed at the discretion of the Chief Administrative Officer, or designee.
10. A list of Peer Support Team members, including their home and/or cell telephone numbers and email addresses, shall be posted in locations readily accessible to staff but not others.
11. Staff may contact any Peer Support Team member without the need to inform a supervisor.
12. A Peer Support Team member shall not be involved in the investigation of any incident if acting in a peer support role with anyone involved in the same incident.
13. Peer Support Team members can conduct meetings, calls, etc., either in person or electronically as needed or requested by staff during regular work hours. The meetings can occur for non-supervisory staff with separate meetings available for supervisors. Participation is not mandatory for staff and meetings shall be confidential as set out below.
14. The Department's Director of Victim Services may assist the Peer Support Team(s) as a resource.
15. Referrals to the Peer Support Team, as a resource, can come from the self-referral of an affected staff, a referral from a supervisor of the affected staff, a co-worker of an affected staff, or another source from within the Department, and participation is completely voluntary.

**Procedure B: Critical Incident Stress Management (CISM)**

1. Staff involved in a critical incident shall be given the opportunity to participate in Critical Incident Stress Management (CISM). This may take the form of an abbreviated debriefing ("defusing") or a full debriefing.
2. Any staff may suggest the need for CISM to the facility Chief Administrative Officer, or designee, or to a Peer Support Team member. This suggestion may come in the form of an anonymous request.
3. The facility Chief Administrative Officer, or designee, shall contact the Peer Support Team Coordinator as soon as possible regarding a critical incident that the Chief Administrative Officer, or designee, determines requires CISM.
4. The Peer Support Team, under the direction of the Team Coordinator, shall contact all staff involved in the incident to inform them of the debriefing, as well as to check on their wellbeing.

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5. The debriefing shall take place within seventy-two (72) hours after the incident but not before forty-eight (48) hours after the incident. The debriefing shall be conducted off-site when available.
6. If more than one staff was involved in the incident, the debriefing shall be a group process.
7. Other than Peer Support Team members and a Living Resources Program mental health professional, or other approved mental health professional, only staff involved in the critical incident shall be allowed to be present at the debriefing.
8. Supervisory staff shall not attend the debriefings unless they are part of the Peer Support Team or are directly involved in the incident, and, if attending, their role is as an equal participant.
9. If involved in the incident, employees shall be required to attend, and staff providing services under contract to or by agreement with the Department shall be invited to attend, a debriefing concerning any of the following:
  - a. line of duty death;
  - b. serious line of duty injury;
  - c. line of duty shooting;
  - d. resident death (other than natural death);
  - e. resident self-injury when loss of life would have occurred without immediate intervention;
  - f. death or serious injury to another person where staff is involved;
  - g. hostage taking; or
  - h. mass resident disturbance.

Active participation is voluntary and shall not be mandated.

10. The Chief Administrative Officer, or designee, may mandate a debriefing for any other significant incident at their discretion.
11. Attendance at debriefings shall take priority over routine work assignments when available. Work time for employees attending a peer support meeting and employees facilitating as Peer Support Team members shall count as work time for Fair Labor Standards Act purposes. The Team Coordinator shall make arrangements for coverage, if necessary.
12. The debriefing shall have at least two Peer Support Team members present to facilitate as well as a mental health professional, if appropriate.
13. Debriefings are confidential and discussions are not to be recorded or disclosed in any manner unless as set out below.

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**Procedure C: Work-Related Personal Trauma**

1. Employees affected by personal trauma that can potentially impact work performance shall be allowed to participate in peer support as set out above, except that attendance is voluntary and shall not be mandated, and family members may be invited to participate. Support can be informal or formal as prescribed in Critical Incident Stress Management (CISM) training, depending on the needs of the staff.
2. Personal trauma that is work-related includes, but is not limited to:
  - a. death of a co-worker while not on duty;
  - b. serious injury to a co-worker while not on duty; or
  - c. significant life event affecting the employee's ability to work;
  - d. chronic/prolonged stress-inducing events; or
  - e. vicarious/secondary trauma.

**Procedure D: Training**

1. The Department's Director of Education and Staff Development, or designee, shall ensure that new employees receive information about the peer support program during new employee training.
2. Each facility Peer Support Team Coordinator shall work with the facility Staff Development Coordinator to coordinate team trainings as well as critical incident stress debriefings.
3. The Department's Director of Education and Staff Development, or designee, shall ensure that each member of a critical incident stress management team (CISMT) shall have the following training, at a minimum:
  - a. sixteen (16) hours or more of basic critical incident stress management training (CISMT) by a certified CISMT trainer or through a nationally recognized organization, such as the International Critical Incident Stress Foundation; and
  - b. an aggregate of twenty (20) hours of annual in-service training in CISM or behavioral health, of which time spent in actual deployment as a member of CISMT may be credited to this twenty (20) hours of annual in-service training requirement.
4. Training may include, but is not limited to the following:
  - a. common reactions to traumatic events;
  - b. Critical Incident Stress Management (CISM);
  - c. confidentiality;
  - d. crisis intervention;
  - e. defusing;
  - f. peer support team roles and responsibilities; and

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- g. information about relevant programs and services, such as the State's Living Resources Program.
- 5. Peer Support training for employees shall take priority over routine work assignments for the Peer Support Team and shall count as work time for Fair Labor Standards Act purposes.
- 6. All training shall be documented in the staff's training record.

**Procedure E: Confidentiality**

- 1. Conversations between staff and a Peer Support Team member shall not be recorded.
- 2. A peer support team member may ask the staff permission to consult with another staff to assist in the matter, and if allowed, the staff shall document that permission in writing.
- 3. Peer support team members shall maintain confidentiality of information disclosed by others during the course of providing peer support, except when:
  - a. the staff admits to abuse or neglect of a child or a dependent adult;
  - b. the staff admits to violence against a domestic partner;
  - c. the staff threatens physical harm to themselves or another person;
  - d. the staff admits to having committed or threatens to commit a crime; or
  - e. there is a risk to security of a facility.
- 4. If, as a result of a peer support session, a team member becomes aware of any of the above situations, they shall immediately notify the Peer Support Team Coordinator and then follow-up with a written report. The Team Coordinator shall notify and forward the report to the facility Chief Administrative Officer, the Department's Human Resources Director and the Department's Director of the Office of Professional Review, or their designees.
- 5. The staff receiving the report shall take the appropriate action as set out Department policies.
- 6. If a peer support team member receives a subpoena or court order to provide information disclosed by others during the course of providing peer support, they shall contact the Department's representative in the Attorney General's Office.

**Procedure F: Holistic Wellness**

- 1. The Peer Support Teams shall be a resource for the Department's Wellness Committee, collaborate as appropriate with the Department's Wellness Committee, and offer support on any joint initiatives related to the holistic wellness of staff.
- 2. The Peer Support Teams' role in this is to provide stability and promote holistic wellness to the affected employee by providing, empathy, active listening, validation, respect for desired boundaries, triage, and referral. Should the nature of the issue

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and or needs of the affected employee go beyond the scope of the supportive assistance listed above then the involved team member shall suggest and make a referral for the affected employee to seek professional assistance from a qualified source.

**VIII. PROFESSIONAL STANDARDS**

None

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