RICHMOND POLICE DEPARTMENT
GENERAL ORDER

Subject: **PEER SUPPORT TEAM (PST)**	Chapter 7	Number 29	# Pages 6
References: CALEA: 11.3.4f, ***22.2.3a, b, e*** VA Code: §2.2-3700, §32.1-111.3	Related Orders: N/A	Effective Date: ***09/17/2026*** Revised By: Review Prv. Rev. Date: ***04/11/2023***	

If any provision of this General Order conflicts with any collective bargaining article, the collective bargaining agreement shall govern.

Chief of Police:

Robert D. Eldridge

I. PURPOSE

This directive establishes a Peer Support Team (PST) to identify its objectives and provide general guidelines for its operation, selection, and assignment of personnel, training, administration, and confidentiality.

II. SUMMARY OF CHANGE

This directive includes updates throughout to rename the Critical Incident Stress Management (CISM) team to the Peer Support Team (PST). Definitions of Critical Incident, Peer Support Team Member (PTSM), Peer Support Team Coordinator, and the Cigna Employee Assistance Program (EAP) have been updated. This directive also establishes updated procedures for initiating Peer Support Team services. New language is denoted in bold and italicized text.

III. POLICY

It is the policy of the Richmond Police Department (RPD) to maintain a PST that consist***s*** of specially trained peers and professional mental health staff to give all Police Department members, and their immediate family, the opportunity to receive tangible peer support through times of personal or professional crisis and/or to help anticipate and address potential problems.

Richmond Police Department recognizes the value of providing employees and their families with a way to deal with professional and/or personal challenges. A successful approach is to provide a program that offers a non-professional (peer) support program in addition to the current ***Cigna*** Employee Assistance Program (***EAP)***. The PST ***is*** comprise***d*** of a group of sworn and ***professional staff*** who have volunteered to be available to any Department member. The program will allow RPD employees to share personal and/or professional ***challenges*** confidentially with someone who understands and cares.

[CALEA 22.2.3a, e]

Richmond Police Department's most valuable resources are its employees. The Peer Support Program (PSP) will assist with stress caused by professional and/or personal events.

IV. ACCOUNTABILITY STATEMENT

All employees are expected to fully comply with the guidelines and timelines outlined in this General Order. Responsibility rests with the division commander to ensure that any policy violations are investigated, and appropriate training, counseling, and disciplinary action is initiated.

This directive is for internal use only and does not enlarge an employee's civil liability in any way. It should not be construed as creating a higher standard of safety or care in an evidentiary sense concerning third-party claims. Violation of this directive, if proven, can only form the basis of a complaint by this Department, and then only in a non-judicial administrative setting.

V. DEFINITIONS

A. ***CIGNA*** EMPLOYEE ASSISTANCE PROGRAM (EAP) – ***A source of help for City employees or members of their immediate families who are experiencing personal problems. Counseling, diagnostic and referral services are provided on a confidential basis. Cigna may be contacted at 1-877-622-4327 24 hours a day, or log on to www.mycigna.com with Employer ID: COR***

[CALEA 11.3.4f]

B. CRITICAL INCIDENT – ***An incident that induces an abnormally high level of negative emotions in response to a perceived loss of control. Such an incident is most often related to a threat to the well-being of the public safety employee or to the well-being of another individual for whom such employee has some obligation of personal or professional concern.*** A critical incident may include, but is not limited to:

1. Line-of-duty death;
2. Serious line-of-duty injury or assault;
3. Suicide;
4. Officer-involved shootings;
5. Multi-casualty incidents or disasters;
6. Serious motor vehicle crashes;
7. Extended undercover operations;
8. Significant event involving children;
9. Incident involving known victim; and,
10. Personal or family tragedies, e.g., violent criminal incidents involving the employee or their families, deaths in family, etc.

C. CRITICAL INCIDENT STRESS – Any situation faced by Emergency Services personnel that causes them to experience extreme emotional reactions, which have the potential to interfere with or limit their ability to perform at the scene or later generate powerful feelings in the Emergency Services workers.

D. CRITICAL INCIDENT STRESS MANAGEMENT (CISM) – The process of educating, preventing, or mitigating the effects of exposure to an abnormal or highly unusual event. The core components of CISM are pre-incident education, on-scene support, one-on-one peer crisis intervention, demobilization, defusing, debriefing, follow-up/referral, and significant other services.

E. CRITICAL INCIDENT STRESS DEBRIEFING (CISD) – Formally, a seven-phase process used in a group meeting, usually held 24 to 72 hours after an incident, employing both crisis intervention and educational methods. The session is targeted toward mitigating psychological distress associated with a critical incident or traumatic event. Debriefings are neither counseling nor an operations critique of the incident.

F. DEFUSING – A brief confidential discussion between employees involved in a critical incident and PST Members (PSTM) immediately following an incident. The purpose of this is to help restore the employee's cognitive functioning and to help prepare the employee to cope with future stress reactions that may arise from the critical incident.

G. DEMOBILIZATION – A brief intervention immediately after a disaster or significant incident, provides a transition period from the major incident to the normal work routine.

H. IMMEDIATE FAMILY – A spouse; child by blood, adoption, or marriage; grandparents, grandchildren for the employee or employee's spouse, parent living in the same household.

I. PEER SUPPORT TEAM (PST) – A team composed of sworn and non-sworn personnel who are trained to provide emotional support to other department employees and family members of department employees who have experienced a critical incident.

J. PEER SUPPORT TEAM MEMBER (PSTM) – A***n*** RPD employee trained ***to provide both day-to-day emotional support for department employees, as well as to participate in the department's comprehensive response to critical incidents. PSTMs are trained to recognize and refer cases that require professional intervention or are beyond their scope of training to a licensed mental health professional.***

K. PEER SUPPORT TEAM COORDINATOR – ***A PSTM designated to address program logistics and development. This individual is responsible for the direct oversight of the team, coordinates peer support activation, collects utilization data, and coordinates training and meetings.*** The coordinator will report directly to the Chief of Police.

L. RICHMOND POLICE DEPARTMENT CLINICIAN – A Clinician available to provide mental health services to any officer or staff needing it. The scope of the services includes individual and family counseling, coordination, referral, wellness, and mental health education, groups, and crisis intervention.

VI. PROCEDURE

A. It shall be mandatory that ***PS***T members maintain strict confidentiality in matters discussed ***while providing peer support services*** or ***in*** peer support meetings. Any statement ***or*** discussion with ***PST*** members while acting in their peer support role shall remain confidential. Members of the Peer Support Team are employees of the Police Department and are bound under specific laws to report ***certain*** incidents if they are divulged. The exceptions to the confidentiality rule are ***in Section VI(G)(1)-(6).***

B. The PST is not an investigative unit of the Police Department; therefore, it will not be the policy of this Department to interfere with nor question PST members concerning the content of the discussion ***had during peer support services***.

C. The PST Coordinator will maintain a confidential record of the types of incidents and the number of ***peer support services*** that are ***provided***. An annual summary will be prepared by the PST Coordinator and submitted to the Chief of Police, providing only the types of incidents and the number of ***peer support services.*** Names and employee numbers will not be used, as there will be no identifying information associated with the summary.

D. All members of the–PST must sign and complete all confidentiality forms before beginning the process of counseling, defusing, or debriefing.

E. A person who is a member of a peer support team, established pursuant to § 32.1-111.3(A)(13), shall not disclose nor be compelled to testify regarding any information communicated to him by emergency medical services or public safety personnel who are the subjects of peer support services regarding a critical incident. Such information shall also be exempt from the Virginia Freedom of Information Act (§ 2.2-3700 et seq.). ***A person whose communications are privileged under subsection A(13) may waive the privilege.***

F. The provisions of this section shall not apply when:

1. Criminal activity is revealed;

2. A member of a critical incident stress management or peer support team is a witness or a party to a critical incident that prompted the peer support services;

3. A member of a critical incident stress management or peer support team reveals the content of privileged information to prevent a crime against any other person or a threat to public safety;

4. The privileged information reveals intent to defraud or deceive the investigation into ***the*** critical incident;

5. A member of a critical incident stress management or peer support team reveals the content of privileged information to the employer of the emergency medical services or public safety personnel regarding criminal acts committed or information that would indicate that the emergency medical services or public safety personnel pose a threat to themselves or others; or

6. A member of a critical incident stress management or peer support team is not acting in the role of a member at the time of the communication.

G. Employees experiencing stress may initiate contact with a PST member at any time.

1. Defusing and debriefing procedures will be activated when the following types of stressful incidents occur or as needed;

a) All police shootings

b) Death or severe injuries to an RPD employee or immediate family.

c) Mass casualty incident

d) Other incidents as determined by the Chief of Police, supervisor, or peer support team member.

2. In case of severe violent injury to a Department employee, the employee shall be offered the opportunity to participate in a defusing and/or debriefing following the incident.

3. Any supervisor may notify ***the*** PST Coordinator or team members of an incident and provide information about it and the employees involved.

4. Field supervisors ***may*** contact the ***Department of Emergency Communications, Preparedness and Response (DECPR)*** when ***the*** PST is needed.

5. The PST, when notified, will respond to the Division or Precinct to provide support and conduct a defusing and/ or debriefing for affected personnel.

NOTE: Consultation with the PST is strictly voluntary. An employee may refuse peer support services without penalty or reprisal.

H. Peer Support Team ***Follow-up Services***:

1. PST members will follow up with all employees involved in a defusing or debriefing within 15 days of the critical incident to ensure that any prolonged or delayed difficulties are addressed and to initiate a referral, if necessary.

2. PST ***members*** will consult with a Mental Health Professional/***RPD*** Clinician when necessary and refrain from advising outside their training.

3. ***PST members*** will also supply resource information for family members of any affected personnel.

4. ***When*** a critical incident stress debriefing is warranted, it should occur promptly after the incident unless a ***qualified mental health professional*** determines that ***PST assistance should be deferred.*** Critical incident stress debriefings will be ***available*** for all employees involved. They may be extended to other involved personnel if deemed appropriate by the PST Coordinator or a designee.

I. Administration:

1. ***PST members*** will not be asked to give information about members they support. When dealing with peer support cases, the Chief of Police may inquire about statistical information regarding the utilization of the PST.

2. Peer Support debriefings, consultations, and/or defusing are solely to provide employees with an opportunity to discuss their feelings about a critical incident from which they have been impacted. Employees will be provided with self-care tips and available mental health resources on a case-by-case basis.

3. Peer Support is not a component of the RPD Internal Affairs Unit, ***Force*** Investigation Team***,*** or Disciplinary Review Process.

4. ***Peer support intervention is not corrective action or discipline.***

5. PST members can be reached by notifying ***DECPR*** who will maintain a listing of the On-Call PST members.

J. Consultation Service from Mental Health Professionals:

1. The PST shall utilize the Department's Mental Health Professionals for consultation.

2. PST members are not trained counselors and will not act in that capacity. However, they will make notifications to the RPD Mental Health Professional when a peer warranting mental health support shares information ***that is better handled by a qualified mental health professional.***

3. Each PST member must be aware of their ***personal*** limitations and shall seek advice and counsel in determining when to disqualify themselves ***from providing support to individuals experiencing situations which the PST has not been trained to address or about which the PST may have strong personal beliefs***.

VII. <u>FORMS</u>

A. Confidentiality Form(s)