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Sheriff

HARFORD COUNTY SHERIFF'S OFFICE ADMINISTRATIVE POLICY

Critical Incident Stress Management and Wellness Program

Distribution:	All Personnel	Policy Number:	ADM 0505
Responsible Unit:	Services and Support Bureau	Rescinds:	MAN5500 dated 03/01/12
Original Issued Date:	02/03/22	Revision #:	2
Latest Required Review was Completed:	11/14/24	Latest Revision Date:	01/27/25
		Next Review Due:	01/31/28

1. Purpose

The Harford County Sheriff's Office (HCSO) will develop a program to focus on employee wellness and implement a Critical Incident Stress Management (CISM) Team.

2. Policy

The HCSO has developed a CISM team that is designed to be a confidential consultation and resource service for members and is not to be used as an investigative tool. The team will consist of trained sworn and non-sworn HCSO personnel able to support members by providing assistance in the areas of personal and group debriefing, anonymous and confidential peer support, and resilience training.

3. Definitions

CRITICAL INCIDENT: any situation faced by members that causes them to experience unusually strong emotional reactions and which has the potential to interfere with the ability to function either at the scene or at a later time.

CRITICAL INCIDENT STRESS DEBRIEFING (CISD): a formal group discussion of a traumatic experience. These confidential meetings typically occur within a reasonable time of the incident. Although a CISD is usually held within three days, the specific timing depends on a number of factors. CISM team members must judge the timing of the CISD meeting on a case-by-case basis.

CRITICAL INCIDENT STRESS MANAGEMENT (CISM): a comprehensive, systematic, and multi- component approach to managing traumatic stress within an organization.

CRITICAL INCIDENT STRESS MANAGEMENT TEAM: a group of trained Agency members approved and supported by the Sheriff, consisting of a coordinator, peer support providers, and a mental health professional able to sustain sanctioned CISDs, one-to-one support, and resiliency services to Agency members.

EMPLOYEE ASSISTANCE PROGRAM (EAP): a work-based program offered to employees that provides access to voluntary and confidential services to address mental health and physical well-being of employees stemming from personal and/or work-related concerns including stress, financial issues, legal issues, family problems, workplace conflicts, and alcohol substance abuse disorders.

FAMILY SUPPORT SERVICES: a set of interventions which may be utilized by the CISM team members to provide a range of crisis support services to families of members in

conjunction with HCSO Policy [ADM 0506](#) - Death or Critical Injury of Agency Member.

FOLLOW-UP SERVICES: contact with members following initial services provided by a CISM team member.

INDIVIDUAL SUPPORT: one-on-one support available to members with any peer support provider, about any topic that is of concern to the member.

MENTAL HEALTH PROFESSIONAL: a CISM trained licensed social worker, psychologist, psychiatrist, or other licensed professional counselor.

PEER SUPPORT PROVIDERS: members of the Agency who are trained through an approved CISM course. These members should be able to identify the normal stress reactions associated with critical incidents.

REFERRAL: recommendations made by members of the CISM team to the Agency members suggesting contact with the Employee Assistance Program (EAP), chaplains, or other mental health providers.

TEAM COORDINATOR: the coordinator is chosen from the assigned CISM team members and approved by the Services and Support Bureau Chief.

4. References

[Maryland Code Annotated, Public Safety § 3-523](#) – EAP for Police Officers

[Maryland Code Annotated, Public Safety § 3-207\(m\)\(2\)](#) – Mental health wellness policies to be implemented in law enforcement agencies and correctional facilities in the State

Harford County Government – [EAP](#)

[\(PER 0406\) Volunteer Chaplain Program](#)

5. Procedure

A. General Provision

1. CISM will not interfere with any on-going criminal or internal investigations.
2. This policy is not to interfere in any way with the voluntary use of/or referral to any other related programs or services.

B. Confidentiality and Responsibility

1. Members who choose to use CISM services must be made aware that no special legal privilege is extended to peer support providers such as in the case of doctors, and patient or attorneys and clients.
2. The Agency and team members must agree to actively protect confidentiality in order to sustain program viability.

3. Peer support providers will ensure Agency members understand that all conversations and sessions are strictly confidential except for:
 - a. Information indicating imminent harm to the member or others;
 - b. Information that may prevent serious crimes; or
 - c. Situations requiring mandated reporting by law (i.e., child abuse, elder abuse).
4. Information shared between peer support providers enabling other team members to garner assistance and experience from one another.
 - a. These discussions will be general in nature, will not include names or other unnecessary identifiers, and will not be discussed outside of closed team sessions.
5. Allegations of team member confidentiality violations, to include the divulgence of sensitive information after the member's tenure with the team, will result in the immediate suspension of member's operational status as a CISM team member until issue resolution.

C. Responsibilities of the Agency.

The Agency will:

1. Consider communications between a member and peer counselor as privileged and will not question a peer support provider on the identity or services provided to a member.
2. Ensure members attend sessions for all mandatory CISM activations but recognize and reassure personnel that active participation is not mandatory, and nobody is compelled to speak.
3. Ensure that notes or recordings will not be taken during a session nor will reports be filed at its conclusion.
4. Support scheduling and logistics requirements of the team and its members regarding training and duties.
5. Provide information regarding an incident to include photos, diagrams, and incident reports.
6. Make provisions for a mental health provider to support the team who is not associated with any fit for duty evaluation.

D. Responsibilities of the Coordinator

The coordinator will:

1. Ensure CISM members comply with policy and procedures set forth in this policy.
2. Monitor CISM members to ensure they meet the requirements of their regular duties and remain eligible for team participation.

3. Monitor CISM team member performance to ensure members meet team standards of training, performance, and behavior.
4. Monitor team members to ensure they are not emotionally overwhelmed by the scope of CISM duties.
 - a. This includes establishment of a peer and professional support apparatus within the team itself.
5. Provide assistance to CISM members reporting confidentiality exceptions previously described in this order.
6. Be ultimately responsible for the administrative and logistical needs of the team, to include:
 - a. Maintaining a team roster schedule;
 - b. Timely notification of scheduled meetings and trainings via the chain of command; and
 - c. Providing general administrative and oversight functions.
7. Submit an annual report to the Services and Support Bureau Chief by January 15th consisting of:
 - a. Number of team members.
 - b. Number of critical incident callouts;
 - c. Number of peer support contacts;
 - d. Number of wellness trainings provided by the team;
 - e. Total number of CISM personnel hours expended; and
 - f. Any monetary expenditure to include overtime, training, or equipment.
 - g. This report will be used only for administrative and planning purposes and will not reference or include the names or experiences of any member disclosed during a CISM contact.

E. Responsibilities of Team Members

Team members will:

1. Sign a membership terms and conditions agreement as part of appointment to the CISM team.
2. Notify the coordinator immediately of issues that may impair or affect the member's ability to operate as a peer support provider.

3. Recognize they are not mental health providers and operate within the limits of their training.
4. Ensure not to take notes or otherwise document the session.
5. Immediately make notification to the coordinator and affected party's command of emergent or criminal issues as described previously in this policy.
6. Provide CISD services, peer support, and resiliency functions and presentations as determined through the HCSO Training Academy.
7. Ensure members will not self-deploy to any incidents without first consulting the coordinator.
8. Ensure the coordinator will consult with the Human Resources manager regarding members that are admitted to a hospital or mental health facility to ensure the proper paperwork is completed regarding police powers, FMLA, and/or leave.

F. Training

1. All training will be provided by recognized professional organizations and individuals working in the CISM field.
2. Initial training will consist of a basic course conducted by recognized CISM instructors and approved by the HCSO.
3. Team meetings and trainings may be conducted on a quarterly basis.

G. Team Member Selection

1. The team will be composed of volunteer HCSO members, not including a coordinator and a licensed mental health care provider.
2. Members must be in a non-probationary status and in good standing with the office.
3. Initial application will be consistent with HCSO policy and procedures established for selection to secondary assignments as outlined in policy [PER 0501-Transfer Procedures](#).
4. All members meeting the requirements will be reviewed by an initial screening board composed of the CISM coordinator, one active member of the CISM team, and a clinician.
5. Individuals selected through this process will be offered training after they have agreed to, and signed, a terms and condition agreement.
 - a. Individuals selected must complete a sanctioned training course before becoming operational with the CISM team.

H. Resignation/Removal from the Team

1. [Resignation](#) or removal of a member from the team will be consistent with established HCSO policy and procedures as outlined in policy PER 0501-Transfer Procedures.

I. Team Notification Procedures for Critical Incidents

1. The team coordinator will be responsible for maintaining and updating current contact rosters.
2. Initial notification will be made by the Watch Commander or Duty Officer to the team coordinator through the CISM email group (cism@harfordsheriff.org).
3. Notification and CISM team response will be mandatory for:
 - a. Police involved shooting or other force applications resulting in death or grave injury;
 - b. Line of duty death;
 - c. Serious injury to members in the performance of their duties; or
 - d. Calls for Service (CFS) involving serious incidents such as child deaths, serious vehicle crashes, suicides, other incidents involving fatalities or serious incidents, etc.
4. Upon notification, the coordinator will contact the on-call team members and coordinate response. Responding team members will report to the designated location and report to the deputy in charge of the incident.
5. Regardless of rank, the peer support provider exercises no command authority when performing team duties.
6. The provider should avoid direct involvement in the incident and concentrate attention on assisting members.
7. The CISM team health professionals will be notified for all critical incidents by the coordinator to provide the best mental health care for all those involved.

J. One-to One Contacts

1. Members may approach any peer support provider at any time.
2. Peer support providers are not mental health practitioners. They will encourage members to seek professional assistance when appropriate.
3. Peer support providers will involve the CISM team mental health providers whenever the member believes a peer should be admitted to a hospital or mental health facility. The mental health provider will ensure a smooth process for the peer to receive the help quickly and confidentially.
4. Peer support is not part of any formal EAP referral, or any administrative action taken by the Agency. While peer support may be requested in conjunction with the EAP, it is not a replacement.

K. Follow up Service

1. Will be provided in accordance with guidelines and may include mental health or other professionals as appropriate or requested by CISM providers and affected members.

L. **Employee Assistance Program (EAP)**

1. The EAP is a confidential and comprehensive resource/benefit to all deputies, employees, and their household members and provides free, in-the-moment support to help navigate personal or professional challenges that might affect their work or home life. EAP services and contact information are accessible to employees anytime 24/7 at the following website by entering code HCG: [EAP HelpLink](#)

6. Summary of Changes

A. While the original date for the required 3-year review of this policy was scheduled for 02/03/25, the policy review was conducted ahead of schedule by the HCSO Court Services Division and signed by the Sheriff on 11/14/24 with the following changes:

1. Under Section 3. Definitions, revised definition of TEAM COORDINATOR to read as follows: “the coordinator is chosen from the assigned CISM team members and approved by the Services and Support Bureau Chief.”
2. Under Section 4. Procedure, Team Notification Procedures for Critical Incidents: inserted text under I.2 and I.3.d that clarifies 1) Initial notification of critical incidents will be made through the CISM email group (cism@harfordsheriff.org); and 2) Notification and CISM team response will be mandatory for any CFS involving serious incidents.

B. On January 27, 2025 the following revisions were made to this policy:

1. Edited title of policy from “Critical Incident Stress Management” to “Critical Incident Stress Management and Wellness Program.”
2. Under Section 3. Definitions, added definition for EAP.
3. Added Section 4. References, to reflect the following references:
 - a. [Maryland Code Annotated, Public Safety § 3-523](#) – EAP for Police Officers;
 - b. [Maryland Code Annotated, Public Safety § 3-207\(m\)\(2\)](#) – Mental health wellness policies to be implemented in law enforcement agencies and correctional facilities in the State;
 - c. Harford County Government – [EAP](#);
 - d. [\(PER 0406\) Volunteer Chaplain Program](#).
4. Added Section 5.L Employee Assistance Program (EAP).


Approved
JEFFREY R. GAHLER
SHERIFF
DATE 1.31.25