

### STATE OF MONTANA DEPARTMENT OF CORRECTIONS POLICY DIRECTIVE

Policy No. DOC 1.3.36	Subject: CRITICAL INCIDENT STRESS MANAGEMENT (CISM)	
Chapter 1: ADMINISTRATION AND MANAGEMENT		Page 1 of 4
Section 3: Human Resources		Effective Date: July 1, 1998
Signature: /s/ Mike Batista, Director		Revised: 03/01/2016

### I. POLICY

The Department of Corrections provides timely assistance to employees and other individuals exposed to critical job-related incidents or stressful events that may require intervention, assessment, and follow up care.

### II. APPLICABILITY

All divisions, facilities, and programs Department-owned and contracted, as specified in contract.

### **III. DEFINITIONS**

<u>Administrator</u> – The official, regardless of local title (division or facility administrator, bureau chief, warden, superintendent), ultimately responsible for the division, facility or program operation and management.

<u>CISM Leave</u> – A period of time during which an employee is removed from the worksite due to exposure to a critical incident.

<u>CISM Debriefing</u> – A structured small-group crisis intervention discussion conducted within 14 days of a critical incident for participants to process and discuss reactions to the incident and obtain emotional support.

<u>CISM Defusing</u> – A facilitated communication with both the employee and their immediate supervisor in the first 12 hours to initially identify critical incident stress needs.

<u>CISM Team</u> – A group of individuals which will include someone from the Office of Human Resources (OHR) and may include a mental health provider facilitator, and/or facilitator(s) trained to provide peer support, defusing, and debriefing.

<u>CISM Team Leader</u> – The Department employee responsible for coordinating and directing the CISM team, training team readiness and competence, developing specific debriefing plans, locating debriefing areas, and submitting debriefing reports to the administrator.

<u>Critical Incident</u> – The on-the-job situation or event that precipitates an individual's crisis or critical incident stress reaction.

<u>Critical Incident Stress</u> – The mental, physical, emotional, or behavioral reactions to a critical incident.

<u>Critical Incident Stress Management (CISM)</u> – A comprehensive, integrated, and systematic crisis intervention approach used to manage and alleviate an individual(s) stress reactions after experiencing critical incidents.

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<u>Department Employee</u> – A person employed by the Department of Corrections who has attained permanent status or is eligible to attain permanent status, as provided in 2-18-601, MCA; volunteers, interns, temporary and short term workers; this term does not include service providers.

<u>Incident Commander (IC)</u> – The individual with overall authority and responsibility for conducting incident activities and managing operations at the incident site.

<u>Mental Health Professional</u> – A licensed clinical social worker, licensed psychologist, or other licensed professional counselor trained in the critical incident trauma-debriefing model who has an understanding of, and experience with, correctional employees.

<u>Peer Support</u> – A Department employee trained to provide peer support in the form of one-to-one discussions, defusing, debriefing, and assisting a mental health professional conducting an assessment.

<u>Service Providers</u> - This term includes contracted persons or other vendors providing service whose assignment is primarily on Department premises, e.g. facility or program office.

### **IV. DEPARTMENT DIRECTIVES**

### A. General

- 1. Critical incidents may include any incident leading to serious injury, death or trauma. It is the responsibility of the IC and the individual employee to determine if CISM is warranted.
- 2. Administrators of divisions, facilities, or programs with direct offender contact will implement and maintain operational procedures directing how to activate a CISM team and designate a CISM team leader whose responsibilities include:
  - a. provide advice and counsel to the IC and assist with CISM;
  - b. provide a written report to the administrator with the date, time, and names of those who attended the CISM debriefing sessions;
  - c. maintain a current telephone list of Department employees from each facility trained in CISM;
  - d. maintain a list of individual(s) trained in peer support;
  - e. designate an area for briefing families;
  - f. designate an alternate CISM team leader if primary team leader is unavailable;
  - g. assist in CISM team selection;
  - h. ensure new CISM team members attend a professional CISM training course;
  - i. coordinate and plan periodic training opportunities for CISM team members;
  - j. ensure the training documentation is forwarded to the Department's Professional Development Bureau for entry into the training database; and
  - k. in the event of an emergency will:
    - 1) establish contact with the command center for briefing;
    - 2) implement the emergency procedures for a critical incident; and
    - 3) arrange for logistical support for families of affected individual(s).
- 3. CISM team members or Department mental health professional are available to assess individual(s) involved in incidents. Employees may also utilize mental health

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## professionals within the state's health care system.

- 4. Services available to individual(s) who have been subject to an incident may include, but are not limited to, the following:
  - a. CISM leave:
    - 1) administrative leave paid leave for up to 40 hours, where the employee is relieved of all duties;
    - 2) temporary telework assignment of meaningful work which can be done on a temporary basis, not to exceed 40 hours, from the employee's home; or
    - 3) temporary reassignment reassignment to another worksite within the Department, which may be either within or outside the facility, division or program, not to exceed 40 hours, unless approved by the administrator in consultation with the Office of Human Resources:
  - b. CISM defusing:
  - c. CISM debriefing;
  - d. counseling through the state health care system;
  - e. hostage rehabilitation; and
  - f. assistance with benefit and insurance issues.

### **B.** CISM Team Responsibilities

- 1. In the event of a critical incident, the responsibilities of the CISM team include:
  - a. ensure that all participants are identified;
  - b. determine the level of services to be activated; and
  - c. if necessary:
    - 1) activate a Department CISM team in accordance with DOC Policy 3.2.1A RD, Emergency Operations Plan, Volume IV, Recovery or access a local CISM team through cooperative agreements;
    - 2) identify CISM debriefing sites;
    - 3) assign peer supporter(s) to support affected individual(s);
    - 4) offer voluntary CISM defusing/debriefing to affected individual(s).
- 2. The team member from OHR is responsible for referring the individual(s) to a provider within the state's health care system.
- 3. The responsibilities of each team member include, but are not limited to:
  - a. attend an initial professional CISM training course;
  - b. attend periodic trainings;
  - c. maintain confidentiality regarding information from peer support and CISM defusing/debriefing sessions; and
  - d. disclose information:
    - 1) relevant in an investigation;
    - 2) necessary to ensure individual(s) safety and continuing mental health care; and
    - 3) mandated by law to be reported.

#### **CLOSING** V.

Questions concerning this policy should be directed to the Office of Human Resources.

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### VI. REFERENCES

- A. 4-4225-1; ACA Standards Supplement, 2008
- B. DOC Policy 3.2.1(A) RD, Emergency Operations Plan (EOP)
- C. Critical Incident Stress Management (CISM): Group Crisis Intervention Manual, International Critical Incident Stress Foundation (ICISF)

### **VII. ATTACHMENTS**

None