

<p style="text-align: center;">STATE OF VERMONT AGENCY OF HUMAN SERVICES DEPARTMENT OF CORRECTIONS</p>	<p style="text-align: center;">Peer Support and Workforce Resiliency</p>		<p style="text-align: center;">Page 1 of 9</p>						
<p style="text-align: center;">CHAPTER: PERSONNEL</p>	<p style="text-align: center;">#113</p>	<p style="text-align: center;">Supersedes: New</p>							
<p>Local Procedure(s) Required: No Applicability: All staff (including contractors and volunteers) Security Level: “B” – Anyone may have access to this document.</p>									
<p>Approved:</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; border: none;"><u>SIGNED</u></td> <td style="width: 33%; border: none;"><u>05/13/2024</u></td> <td style="width: 33%; border: none;"><u>05/27/2024</u></td> </tr> <tr> <td style="border: none;">Nicholas J. Deml, Commissioner</td> <td style="border: none;">Date Signed</td> <td style="border: none;">Date Effective</td> </tr> </table>				<u>SIGNED</u>	<u>05/13/2024</u>	<u>05/27/2024</u>	Nicholas J. Deml, Commissioner	Date Signed	Date Effective
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PURPOSE

This policy establishes the Department of Corrections (DOC) peer support program, how a DOC staff member becomes a peer supporter, and the role of a peer supporter.

AUTHORITY

18 V.S.A. § 7257b and 28 VSA § 127.

DEFINITIONS

Clinical Role: An outside consultant (e.g., Wellness Clinician) with extensive experience in Peer Support issues who is contracted by the DOC, or an identified/certified Peer Support Team member with extensive experience in Peer Support issues who has a minimum of a master’s degree with an emphasis in psychology or counseling.

Peer Support Program: A program established by the Department of Corrections (DOC) to provide appropriate peer support services to DOC staff members.

Peer Support Specialist (Peer Supporter): A DOC staff member who, by reason of the staff member's prior experience, training, or interest, has expressed a desire and has been selected to provide appropriate peer support services to participants.

Peer Support Team Leader: An employee who coordinates and administers the activities and trainings of peer services. The Team Leader serves as the liaison between the Peer Support Team and the Department. The Team Leader confers with the Facilities Executive, Facility Operations Manager, and the Special Team Operations Coordinator to deploy the Peer Supporters for critical incidents. The Team Leader oversees the Peer Support Team and supervises the Region Leaders. The Peer Support Team Leader is overseen by the Deputy Director of OPSC.

POLICY

The DOC's policy is to support, and commit to, opportunities that prioritize staff wellness. The DOC understands that stress may be generated in the workplace or at home and that toxic levels of stress adversely affect a staff member's health, relationships, safety, and work performance. To that end, the DOC is further committed to offering all staff opportunities to mitigate their stress levels, including through access to a Peer Support Program.

GENERAL PROCEDURES

A. Peer Support Program

1. Peer Support Program is a confidential, non-judgmental, and safe peer-to-peer resource for all DOC staff. The Peer Support Team and its volunteer members seek to normalize peer-to-peer support, help staff build resiliency, and connect staff with other support services, as needed.
2. Peer Supporters, also known as Peer Support Specialists in statute, are not licensed therapists. If a staff member needs a higher level of intervention, the Peer Support Team shall:
 - a. Refer the staff member to the Wellness Clinician, Employee Assistance Program (EAP), or other interventions, as appropriate; and

- b. Notify the Peer Support Leadership staff, in accordance with the procedures in Section C., The Role of a Peer Supporter, including the:
 - i. Team leader;
 - ii. Assistant Team Leader; and
 - iii. Appropriate regional Squad Leader about their concerns.
- 3. The Peer Support Leadership staff shall:
 - a. Ensure the Vermont Correctional Academy (VCA) informs all new cadets about the Peer Support Program what it can offer staff;
 - b. Make all DOC staff aware of peer support, and how to access program resources; and
 - c. Coordinate team member decompression visits with the Wellness Clinician.

B. Application Process and Member Eligibility for Peer Supporters

- 1. The Peer Support Leadership staff are responsible for initiating and updating all DOC staff on the recruitment process and schedule, as needed. Prior to the start of each recruitment cycle, the Peer Support Leadership staff shall make an email announcement to all staff on how to apply to the Peer Support program, application deadlines, and any other applicable information.
- 2. Following a recruitment announcement, all interested DOC staff shall submit an application to the Peer Support Leadership staff. The application shall include:
 - a. Signed approval from a Superintendent, District Manager (DM), or Supervisor, if the staff is located at the Central Office; and
 - b. Their most recent performance evaluation, which must be rated at least “satisfactory.” If the applicant does not have a performance evaluation, the Superintendent, DM, or Supervisor shall indicate this on the application (i.e., no evaluation).
- 3. The Peer Support Leadership staff shall:
 - a. Screen all applicants and consider the following when determining eligibility for membership to the peer support program:
 - i. The applicant shall be a permanent classified employee and through their six-month probation;
 - ii. The applicant shall not be the subject of any employee disciplinary action within the previous six months;

- iii. The applicant shall not be under administrative investigation at the time of application;
 - iv. The applicant's availability for assisting with interventions and Peer Support program activities; and
 - b. Conduct an interview and review the applicant's demonstration of:
 - i. Respect and trust of peers;
 - ii. Ability to maintain information confidential;
 - iii. Listening and communicating effectively with others;
 - iv. Empathy;
 - v. Sensitivity to others;
 - vi. Adaptability;
 - vii. Maintaining boundaries;
 - viii. Ability to work within the standard operating procedures of Peer Support program; and
 - ix. Understanding and use of good and consistent communication with Peer Support Leadership staff; and
 - c. Train all Peer Supporters on the following topics:
 - i. Common reactions to traumatic events;
 - ii. Critical Incident Stress Management (CISM);
 - iii. Confidentiality;
 - iv. Crisis intervention;
 - v. Defusing; and
 - vi. Roles and responsibilities of Peer Supporters.
- 4. Participation in the training described above shall take priority over a staff member's routine work assignment. It shall count towards approved work time.

C. The Role of a Peer Supporter

- 1. All selected applicants shall complete a six-month probationary period in which they shall complete:
 - a. All acknowledgement forms which set the expectations for participation in the peer support program. Peer Support Leadership staff shall store all acknowledgement forms in the staff member's program file;
 - b. All required trainings determined by the Peer Support Leadership staff, and Special Teams Operations Coordinator; and

- c. Any additional onboarding requirements of the Peer Support program as determined by the Peer Support Team Leadership staff.
2. Peer Supporters shall:
 - a. Comport themselves with integrity;
 - b. Listen to, and support, staff members who seek peer-to-peer assistance during a time of crisis, stress, or trauma;
 - c. Connect the staff member with another Peer Supporter who is not in the staff member's immediate chain of command;
 - d. Provide educational materials and information to all DOC staff on wellness and resilience;
 - e. Deliver introductory trainings on peer support and basic mindfulness to new staff at the Vermont Correctional Academy (VCA).
 - f. Ensure that family members of staff members also have access to this support system following a line of duty death or serious injury;
 - g. Promote peer support and its mission;
 - h. Participate in calls and meetings with other members to process issues, concerns, personal frustrations, and provide peer-to-peer support, in a confidential and safe environment; and
 3. Supervisors shall recuse themselves from serving as a Peer Supporter for any staff who are direct reports (e.g., direct supervisees). In these circumstances, the supervisor shall inform their supervisee that they cannot operate as their Peer Supporter and refer them to another peer supporter.
 4. Peer Supporters shall also maintain the confidentiality of any staff member who seeks peer-to-peer support. Protected information shall never be disclosed even after a Peer Supporter, or the staff member who made the disclosure, is no longer employed by the DOC.
 - a. Peer Supporters may discuss situations (e.g., post-incident status check, training, decompression) with other Peer Supporters members during team meetings, but they shall not disclose any identifying information.
 - i. This information shall not be discussed or shared outside of Peer Support program.
 - ii. All conversations shall be discussed in a professional and respectful manner.
 - b. There are some situations that require a Peer Supporter to disclose a concern to supervisors, including any:

- i. Threat of suicide or homicide made by a participant of a peer support session, or any information conveyed in a peer support session related to a threat of suicide or homicide;
 - ii. Information relating to the abuse of a child or vulnerable adult, or other information that is required to be reported by law. This notice does not alleviate the mandated reporting requirement;
 - iii. Admission of criminal conduct; or
 - iv. Plan to commit a crime.
 - c. If a staff member begins to describe any of the circumstances described under section C.4.b. during a peer-to peer intervention with a Peer Supporter, the Peer Supporter shall immediately:
 - i. Inform them that confidentiality cannot be maintained;
 - ii. End the conversation or redirect the interaction toward how they are managing things emotionally; and
 - iii. Refer them to the appropriate supervisor or resource.
 - d. Breaching confidence is considered a violation of DOC policy.
 - i. If any staff member is concerned about whether confidentiality has been breached, they shall notify the Peer Support Team Leadership.
 - ii. Peer Supporters who violate confidentiality other than under the circumstances described in section C.4.b. shall be permanently removed from the Peer Support Team.
 - iii. A Peer Supporter who breaks confidentiality may be referred to the Department of Human Resources (DHR).
 - iv. A Peer Support Specialist who holds a professional license may face additional consequences, as appropriate to their licensure.
- 5. Membership in the Peer Support program may be revoked by the Team Leadership for the following reasons:
 - a. Violating confidentiality;
 - b. Organizing, or in any way attempting to organize, a group intervention (e.g., defusing, debriefing) without the approval of Team Leadership;
 - c. Failing to be present at an assigned intervention or at a scheduled educational or in-service presentation unless attendance is waived (e.g., illness, personal emergency);
 - d. Failing to complete tasks required of members of the Peer Support Team;

- e. Misrepresenting any fact;
 - f. Having more than one unexcused absence from required meetings or trainings in a calendar year
 - g. Failing to adhere to the expressed direction of the Peer Support Team Leadership, Peer Support consultant and mental health professional;
 - h. Failing to follow any other Peer Support program protocols and procedures;
 - i. Earning an Annual Performance Evaluation rating below “Meets Standards;”
 - j. Violating DOC work rules; or
 - k. Receiving a disciplinary action resulting in suspension.
6. Supervisors or local managers shall inform the Peer Support Leadership staff when a staff member is under investigation.
 7. A Peer Supporter is also responsible for informing Peer Support Leadership staff if they are under investigation.
 8. If a staff member is under investigation for any reason, their membership on the Peer Support Team shall be immediately suspended until the investigation concludes.
 - a. The staff member shall immediately report their suspension to the Peer Support Team Leadership.
 - b. If the Peer Supporter fails to notify the Peer Support Team Leadership when they are the subject of an investigation, the Peer Support Team Leaders shall immediately dismiss them from the program.
 9. When an investigation concludes and the claims of misconduct are unsubstantiated, the staff member may rejoin the Peer Support Team.
 10. Peer Supporters are encouraged to take a step back from Team responsibilities if they have reached capacity with work and personal obligations impeding their ability to practice self-care.

D. Activation of Peer Support and Referrals to Peer Support

1. A Peer Supporter may be asked to engage in peer-to-peer support upon receiving notice of a critical incident, through a referral, or direct contact from a staff member.

2. Following a critical incident, peer support shall be notified, in accordance with the field and facility standard operating procedures on incident reporting.
 - a. The Peer Support Leadership staff shall immediately contact the Peer Supporters through whichever means of communication (e.g., phone, text) is most practical and organize an appropriate response to the incident.
 - b. Once a response plan is established, the Peer Support Leadership staff shall notify the local manager of the response plan including the names of the Peer Supporters and the approximate time they will arrive.
3. Any staff member may also directly refer a staff member or make a self-referral to a local Peer Supporter or the Peer Support program. Following a referral, a Peer Supporter or the Peer Support Leadership staff shall:
 - a. Connect with the person making the referral to better understand the circumstances that lead to the referral;
 - b. Contact the referred staff member using the least intrusive method (e.g., text, call, email); and
 - c. Match a Peer Supporter with the referred staff member at the discretion of the Peer Support Team Leadership.
4. A staff member's engagement with a Peer Supporter is voluntary.
5. Once a Peer Supporter is activated, they shall:
 - a. Provide peer-to-peer support, in accordance with the procedures described in section C., The Role of a Peer Supporter; and
 - b. Try to contact the referred staff member at least once but up to three times to initiate support. The Peer Supporter and staff member shall agree to a contact schedule and method of contact moving forward.
6. If the Peer Team Leadership or local Peer Supporter is unable to respond to a referral or self-referral to peer support, they shall gather and relay the information to an immediate Peer Supporter to respond accordingly.
7. If there is a staff safety plan in effect, the local manager shall refer the staff member to the Peer Support Leadership staff. The Peer Support Leadership staff shall direct appropriate Peer Supporter(s) to initiate contact with the staff member.

E. Data Collection Documentation

1. The Peer Support program shall collect all initial outreach and sustained contact data to track how often staff are using Peer Support and the efficacy of the Peer Support program.
2. Each Peer Supporter shall complete monthly tracking forms.
 - a. The monthly tracking forms shall not include any identifying information.
 - b. The data points (e.g., date of contact, referral to higher level of care) tracked are subject to change so that the Peer Support program may track information, as needed, or requested.
3. The Peer Supporters shall submit the tracking forms to the Peer Support Leadership staff each month.
4. The Peer Support Leadership staff shall submit the aggregated data to the Special Teams Coordinator, the Deputy Director, and Director of OPSC by the end of each month.