POLICY NO: <u>06-28-2016</u> DATE OF REVISION: <u>10-27-16</u>

CATEGORY: GENERAL

POLICY NAME: Critical Incident Debriefing Protocol

OUTAGAMIE COUNTY DEPARTMENT OF HEALTH AND HUMAN SERVICES

Purpose: To ensure that agency staff receive the proper confidential and responsive support following a critical incident involving clients, coworkers, or an event in the agency.

* This process will be kept confidential. Peer reviewers are held to the same confidentiality rules as the Employee Assistance Program (EAP).

DEFINITIONS

Critical Incident

- Death or severe injury of a child or adult consumer in an open or closed case.
- Serious injury or death of any Outagamie County Department of Health and Human Services staff in the course of and related to their work duties.
- Any serious physical or psychological threat to an employee or their family.
- An incident or a series of incidents in which the circumstances are such that cause significant distress.
- A traumatic event that occurs to a staff member outside of their work duties, who has given permission to disclose information to staff, or if a death of a colleague occurs.
- A more global or community event that causes distress (i.e., local bombing, controversial significant issues).

<u>Crisis Debriefing</u>: A confidential process provided by a trained facilitator in an individual or group format to mitigate the impact of a critical incident and to accelerate the recovery process for the staff involved, typically within two weeks of the incident, and is designed to achieve psychological closure. Crisis debriefing is not therapy nor is it a long-term process.

<u>Debriefer</u>: A person or team selected by the in-house coordinator or director of Health & Human Services to provide short-term critical incident debriefing. The debriefer(s) will be from ThedaCare Employee Assistance Program (EAP).

<u>Peer Debriefer</u>: A person from the Department of Health & Human Services that has received at least two days of critical incident debriefing training and has agreed to act as an internal debriefer. The peer debriefer cannot be involved in the incident.

PROTOCOL

1) Initiation of a Critical Incident Response

Any department member recognizing an employee's, or their own involvement, in a potential critical incident or is showing signs of impact during or after hours is to immediately inform that employee's supervisor and/or division manager.

- The supervisor or division manager will check The Clinical Manager (TCM) to determine which divisions have had contact with the involved consumer or family, in order to find an impartial, unaffected peer debriefer. That supervisor or manager will share that information with the Critical Incident Debriefing Coordinator when initiating the debriefing process.
- The supervisor will also check in with the affected staff.

• If after hours, supervisor on-call and/or manager will address the staff person's immediate needs. The supervisor/manager may contact EAP on-call staff to respond after hours if there is an emergent need.

Note: Because workers may have difficulty immediately identifying the extent and impact of the stress involved, a critical incident should not be ruled out solely because the involved worker minimizes or denies that an incident is critical.

2) Debriefing

Critical incident debriefing occurs on work time. Participation of staff is voluntary; however, staff involved in the incident are highly encouraged to attend. Supervisors will not participate in critical incident debriefings with staff unless involved in the incident and there is staff agreement for their presence. If there is not agreement, a separate debriefing for the supervisor(s) will be offered.

The supervisor will contact the Critical Incident Debriefing Coordinator(s) Linda Rasmussen (x4931) and Colleen Hietpas (x2222) to initiate the debriefing process. The coordinator will:

- Contact ThedaCare EAP At Work (920-749-2390) to arrange the first response within 24-72 hours. If the incident occurs after hours, the supervisor/manager may elect to contact EAP for immediate response if it cannot wait until the next business day.
- Consult the list of internal peer debriefers to determine who is next on the rotation to accompany the EAP debriefer. This will allow internal staff to be mentored in the process and be available to support agency staff during the session. The peer will not come from the affected area.
- Arrange for a comfortable meeting space that will ensure confidentiality.
- Schedule a separate debriefing for supervisors, if needed.
- Share with affected staff the date, time, and location of the debriefing.
- Contact the Director, Deputy Director, and Human Resources with the number of staff participating (do not include names), date, time, and total hours of debriefing session(s).

Confidentiality is adhered to unless an individual says something that poses a risk to themselves or others.

3) Communication

If the incident is on a larger scale, the Supervisor/Manager will keep the Director and Deputy Director updated about debriefing session(s) and determineif a large group crisis intervention is needed.

4) Follow up

- a. If, after a debriefing, staff feels there is a need for ongoing support in order to continue the recovery process, consider one of the following:
 - Talk to peer debriefer, co-worker, or your supervisor.
 - Contact Employee Assistance Program (EAP) at (920) 749-2390.
 - Make an appointment with a private provider.
- b. The Health and Human Services Director may determine the need for a follow-up meeting open to all interested parties within affected divisions to provide information, correct misinformation, and provide an opportunity for feedback to staff regarding indirect concerns stemming from a critical incident.
- c. Recommendations will be considered by management when addressing any changes needed to such things as building, grounds, and response.
- d. A timely action plan will be developed to address changes needed and implement expeditiously.

e.	The Critical Incident Debriefing Workgroup will meet on a regular basis to evaluate and possibly revise, update, or improve this policy.