I. Purpose

The purpose of this policy is to outline this Department’s response in the early identification of potential problems employees, personnel requiring mental health services, and remedial action available.

II. Policy

The duties and responsibilities of the law enforcement profession are often emotionally demanding and difficult, and employees generally risk experiencing stress and related emotional difficulties. Emotional problems may have a negative impact on personnel performance, and, in extreme instances, may present a danger to the welfare and safety of employees, their families, the general public and fellow employees. Therefore, it is the policy of this Department to implement and maintain a “Personnel Early Warning System” to identify Department personnel who may require Departmental intervention efforts and to provide all personnel with access to mental health services to help them preempt and resolve emotional difficulties and, under emergency conditions, to take those measures necessary in the provision of mental health services to ensure the well-being and safety of employees and the general public.

III. Definitions

Personnel Early Warning System: A system designed to provide for the early identification of potential employee problems and provide a menu of remedial actions available.
Peer Counselor: A non-professional employee volunteer of this agency, or, as authorized by this Department, a chaplain or physician who provides mental health, intervention services to agency personnel.

Mental Health Professional: A licensed professional, departmentally authorized social or mental health, caseworker, counselor, psychotherapist, psychologist, or psychiatrist.

IV. Procedure

A. The Personnel Early Warning System is a system designed to provide for the early identification of potential employee problems that may require Departmental intervention efforts, and provides a menu of remedial actions available. This system will increase the Department’s accountability and offer employees a better opportunity to meet the Department’s values and mission statement.

1. Initiation of the system (CALEA 35.1.9.a)

The criteria for the initiation of the Personnel Early Warning System is as follows:

a. The occurrence of a single serious incident may require the intervention of the Department under this system. Serious incidents shall include, but are not limited to the following:

1) Officer involved shooting;

2) Death of a family member, Department member, or close friend;

3) Divorce;

4) Arrest;

5) Marital problems;

With the exception of item 1) above, the occurrence of a serious incident may not require intervention but will initiate a review of collected materials and a continued evaluation of the employee for future or undetected problems. The occurrence of an Officer involved shooting shall (in all cases) require the immediate referral to a Mental Health Professional.
b. A review based on current patterns of collected materials may require the intervention of the Department under this system. The collected materials that comprise this Department’s Personnel Early Warning System are listed as follows:

1) EPMS;
   a) All EPMS will be reviewed by the Component Commander at the time of their submission. The Component Commander will compare the overall rating of the employees with previous EPMS to determine inconsistencies or patterns.

2) Disciplinary Actions;

3) Citizen Complaints:

4) Use of Force Incidents:

5) Internal Affairs Investigations;

6) Workmen’s Compensation Claims;

7) Sick Leave Usage;

8) Criminal History Checks;

9) Drivers Record Checks;

10) Long Term Summary (attendance record to include time in and time out);

11) Changes in physical and professional appearance;

12) Difficulties with co-workers.

13) Performance (Day to Day)

14) Credit Checks (CALEA 35.1.9.a)

2. Evaluations of the system (CALEA 35.1.9.c)

a. The collected materials that comprise this Department’s Personnel
Early Warning System will be evaluated as follows:

1) EPMS;
   a) All EPMS will be reviewed by the Component Commander at the time of their submission. The Component Commander will compare the overall rating of the employees with previous EPMS to determine inconsistencies or patterns.

2) Disciplinary Actions;
   a) The Patrol Commander will conduct a review/comparison of each Disciplinary Actions at the time of occurrence and will conduct an annual review and analysis of all disciplinary action within the department.

3) Citizen Complaints:
   a) The Patrol Commander will conduct a review/comparison of each Citizen Complaints at the time of occurrence and will conduct an annual review and analysis of all Citizen Complaints within the department.

4) Use of Force Incidents:
   a) The Patrol Commander will conduct a review/comparison of each Use of Force Incident at the time of occurrence and will conduct an annual review and analysis of all Use of Force Incidents within the department.

5) Internal Affairs Investigations;
   a) The Patrol Commander will conduct a review/comparison of each Internal Affairs Investigation at the time of occurrence and will perform an annual review and analysis of all Internal Affairs Investigations within the department.

6) Workmen’s Compensation Claims;
a) The Department’s Workmen’s Compensation Liaison will conduct a review/comparison of each Workmen’s Compensation Claims at the time of occurrence and will conduct an annual review and analysis of all Workmen’s Compensation Claims within the department. This report will be forwarded to the Patrol Commander.

7) Sick Leave Usage;
   a) The Patrol Commander will conduct a review/comparison of each Sick Leave Usage bi-annually and will conduct an annual review and analysis of all Sick Leave Usage within the department.

8) Criminal History Checks;
   a) The Patrol Commander will conduct a Criminal History Check on each individual once a year and will conduct an annual review and analysis of all Criminal History Checks within the department. This report will be forwarded to the Chief.

9) Drivers Record Checks;
   a) The Patrol Commander will conduct a Drivers Record Checks on each individual once a year and will conduct an annual review and analysis of all Drivers Record Checks within the department. This report will be forwarded to the Chief.

10) Long Term Summary (attendance record to include time in and time out).
   a) The Patrol Commander will conduct a review/comparison of each Long Term Summary as submitted and will conduct an annual review and analysis of all Long Term Summaries within the department.

11) Changes in physical and professional appearance
a) The Supervisor will monitor and report any changes in the physical and professional appearance of the employee.

12) Difficulties with co-workers

a) The Supervisor will monitor and report any difficulties with co-workers, of a significant or prolonged nature, that the employee may be experiencing.

13) Performance (Day to Day)

a) The Supervisor will monitor and report any changes in the effectiveness and efficiency of the employee’s performance of his/her duties.

b) The Patrol Commander will complete an annual system review and forward the report to the Director. (CALEA 35.1.9.c)

3. Departmental reporting requirements of conduct and behavior. (CALEA 35.1.9.b)

a. All Department personnel shall report, to their immediate supervisor, all individuals whose conduct or behavior resembles the following: These include, but are not limited to,

1) Abrupt changes in prescribed employee response or behavior such as excessive tardiness, absenteeism, abnormal impatience, irritability or aggressiveness, or repeated instances of overreaction or failure to act in the line of duty;

2) Expression of irrational or bizarre thoughts or actions,

3) Erratic mood swings; and

6) Indications of alcohol or drug abuse.

b. Supervisory personnel who observe or receive information regarding the above types of behavior shall forward any and all such reports to the Director via the Chain of Command.
4. Roles and responsibility of first and second line supervisors (CALEA 35.1.9.d, 22.2.6.e)

a. Supervisory personnel are responsible for continuously monitoring personnel performance and behavior and shall be alert to behavioral indicators that suggest emotional problems. These include, but are not limited to,

1) Uncharacteristic or repeated citizen complaints, particularly those related to excessive force;

2) Abrupt changes in prescribed employee response or behavior such as excessive tardiness, absenteeism, abnormal impatience, irritability or aggressiveness, or repeated instances of overreaction or failure to act in the line of duty;

3) Irrational or bizarre thoughts or actions,

4) Unexplained changes in work habits or patterns of leave usage;

5) Erratic mood swings;

6) Indications of alcohol or drug abuse; and

7) Decreased productivity, poor morale, mistakes and injuries.

b. Supervisory personnel who observe or receive information regarding the above types of behavior shall consult with the employee for an explanation and, when necessary, may confer with peer counselors or mental health professionals for guidance.

c. Where circumstances indicate, the supervisory employee shall suggest a voluntary self-referral to the subject employee. Where emotional impairment/ dysfunction is suspected, either prior to or following these consultations, supervisory personnel may contact the employee’s Director to determine whether an administrative referral to mental health professionals is warranted. (CALEA 22.2.6.d)

d. Under emergency conditions, when an employee's behavior constitutes a significant danger to himself or others, a supervisory employee may order his direct and immediate referral for mental
health evaluation. The mental health professional shall be contacted for instructions prior to referral, and transportation shall be provided for the subject employee. (CALEA 22.2.6.d)

e. In instances where the Director believes that an employee is experiencing serious or debilitating emotional or psychological problems, he shall direct that the employee be interviewed by an Department-authorized mental health service provider.

1) A written copy of the referral order shall be forwarded to the subject employee, to the mental health service provider and to the Department's Director. (CALEA 22.2.6.d)

2) The Director shall take all necessary steps to ensure the confidentiality of the referral order and its contents and shall restrict access to those persons with a legitimate need to know.

3) Following the mental health assessment, an employee may be returned to the original duty assignment, reassigned to alternative duty, placed on temporary light duty or placed on administrative leave as deemed appropriate.

a) An employee's work status shall be re-evaluated every 30 days while under the care of a mental health professional or until such care has been terminated.

b) An employee may be returned to regular duty; his work assignment may be modified or he may be temporarily or permanently relieved from duty at any time in accordance with recommendations of the mental health professional. The employee's powers of arrest may also be terminated or suspended in accordance with the above recommendations.

c) Reinstatement to regular duty of any employee requires the affirmative recommendation of an Department-authorized psychologist/ psychiatrist.

d) Job security and promotional opportunities shall not be jeopardized by an employee solely for having participated in psychological counseling services.

POLICY AND PROCEDURE # 92 Personnel Early Warning System

8
However, failure to seek treatment to correct deficiencies in job performance may reduce or eliminate promotional consideration or jeopardize continued employment.

f. Training

1) All supervisory personnel shall receive annual training on this policy, program services, identification of employee behaviors which would indicate the existence of employee concerns, problems and/or issues that could impact employee job performance. (CALEA 22.2.6.f)

5. Remedial Action (CALEA 35.1.9.e)

a. Remedial actions authorized by this department are as follows:

1) Peer Counseling;

2) Department-authorized clergy;

3) Professional Mental Health Services:
   a) MUSC Employee Assistance Program (EAP);
   b) Mobile Crisis Unit;
   c) MUSC National Crime Victims Research and Treatment Center;
   d) Hot Line; and
   e) MUSC Institute of Psychiatry. (CALEA 35.1.9.f)

6. Employee Assistance Programs (CALEA 22.2.6.a, 35.1.9.f)

a. Peer Counseling

1) Peer counselors shall be authorized by this agency to provide voluntary counseling services to agency employees only after having successfully completed this agency's prescribed course of instruction.

a) Employees who wish to serve as peer counselors
shall notify this agency's coordinator of peer counseling services (Ombudsperson).

b) Selecting candidates for peer counselor shall be the responsibility of the peer counseling supervisor with final approval of the Director.

c) This Department's Training Officer is responsible for ensuring that peer counselor candidates receive appropriate training through designated licensed professionals prior to the peer counselor’s activation.

2) Title, name and telephone number of peer counselors and their availability shall be posted for the benefit of all Department employees. The peer counseling supervisor shall be responsible for administering and supervising the program and assuring that services are available on a reasonable basis to all Department employees.

3) Department employees may voluntarily seek the assistance of a peer counselor at any time while off-duty without supervisory approval or, with supervisory approval during duty hours.

4) Peer counselors may be used to assist employees and their families in cases of job-related crises through informal counseling and support and through referral to professional mental health service providers where necessary.

5) Employees should use peer counselors as a referral source where appropriate and may, with or without anonymity, provide the name of a fellow employee or employee for discreet and confidential intervention.

6) Strict confidentiality shall be maintained between the peer counselor and the counselee. With the exception of criminal activity, nothing discussed between counseling participants shall be divulged to any third party without the express written consent of the counselee or under the following conditions.

a) Employees who have been involved in a violation of law or their oath of office shall not rely upon nor
expect peer counseling to serve as a means of relieving or diminishing their real or perceived responsibility.

b) When there is an indication that an employee presents a clear and present danger to himself or others, peer counselors are required to report these facts to the Director.

7) As an alternative to peer counseling, employees are encouraged to contact personal or Department-authorized clergy, physicians or mental health professionals when deemed necessary for resolving emotional crises.

b. Department-authorized clergy

1) MUHA Pastoral care/Chaplaincy Services.
   a) Pastoral care services are available 24 hours a day, seven days per week by calling the Pastoral Care Office at 792-9464 during regular office hours or paging the Chaplain through the page operator at 792-2123 during all other hours. For requests requiring a response from clergy of a particular denomination, every attempt will be made to contact the requested clergy.
   b) Assistance is available to staff for personal or work related conflicts, education services, or memorial services.

2) Coastal Crisis Chaplaincy
   a) Pastoral care services are available 24 hours a day, seven days per week by calling 724-1212.
   b) The Coastal Crisis Chaplaincy provides pastoral care and counseling for employees and families of Law enforcement and other emergency responders, as well as the general public; assist the Coroner in notifying individuals who have lost a family member in a violent manner; assists the Mobile Crisis Unit and SWAT teams in hostage negotiations and other emergency situations; and
provides follow-up visitations in the home or the hospital for victims of crimes and their families.

c. Professional Mental Health Services

1) Mental health service providers are available to all employees of this Department and their families as allowed by insurance coverage or Department policy. Use of these services shall be treated in the same manner as any other work-related illness or disability.

2) The services of mental health professionals may be invoked by employee self-referral, referral of a supervisor or peer counselor through the Department chief executive or by policy following life-threatening, traumatic experiences.

3) The mental health professional shall

   a) Maintain the confidentiality of all communications concerning the referral and its findings;
   b) Acknowledge receipt of the order and advise whether the employee responded; and
   c) Advise the Director of the employee's fitness for duty and provide recommendations for assignment.

4) Services Available

   a) MUSC Employee Assistance Program (EAP)
      1) EAP is a benefit of employment, provided at no cost to the individual.
      2) EAP is a confidential service provided to help individuals deal with the difficult personal, family or work related problems. (CALEA 22.2.6.b)
      3) Assistance is provided in the following areas:

         Relationship issues, divorce, single parenting, elder care;
Drug and alcohol dependency;

Depression, anxiety, grief, stress;

Financial and legal issues;

Workplace stress, problems with a coworker or boss;

Weight management; and

Other health and wellness issues. (CALEA 22.2.6.a)

4) If an individual is directed to EAP by this Department, the individual will be required to sign a consent form, giving the Employee Assistance Program therapist permission to contact the Department and confirm that the individual kept their appointment. (CALEA 22.2.6.c)

5) The MUSC EAP is available to help and individual by providing:

Professional assessment - to help identify what’s going on;

Confidential help - from counseling, to finding a service for ongoing assistance;

Guidance - to develop a working plan aimed to solving problems; and

Prevention and education - information to help avoid recurring problems.

Referral - to services within the Medical University of South Carolina system or to community resources for appropriate diagnosis, treatment, and follow-up. (CALEA 22.2.6.c)
6) EAP program services may be obtained at the request of the individual (Self-Referral) or at the direction of the Department (Command-Referral). An EAP representative can be reached at 792-2848. *(CALEA 22.2.6.a.b)*

b) Mobile Crisis Unit

1) This Unit is available for immediate intervention in serious incidents such as suicides, attempted suicides, etc.

2) The Mobile Crisis Unit can be reached at 727-2086.

c) MUSC National Crime Victims Research and Treatment Center

1) This is a comprehensive program that offers complete evaluation and treatment for victims of crime, violence and trauma. Expertly trained mental health professionals provide a variety of assessment, intervention and treatment services.

2) The National Crime Victims Research and Treatment Center offers individuals, group or family therapy, short- and long-term treatment. Specialized services are available for:

   Children and adolescents;

   Adults;

   Older adults;

   Home-and School-based treatment for children;

   Rural, minority, and Spanish-speaking populations; and

   Physical injured victims.

3) The National Crime Victims Research and Treatment Center can be contacted at 792-2945.
d) Crisis Hot Line -

1) The Crisis Hot Line provides confidential assistance over the telephone for any and all personal difficulties.

2) The Crisis Hot Line can be contacted at 744-4357 or 1-800-922-2283.

e) MUSC Institute of Psychiatry

1) The Institute of Psychiatry offers a full range of psychiatric services from in-house treatment programs to outpatient services.

2) The MUSC Institute of Psychiatry can be contacted at 792-7791 or 792-7375. (CALEA 35.1.9.f)