

3.03-7

DAYTON POLICE DEPARTMENT
GENERAL ORDER
POST CRITICAL INCIDENT PERSONNEL
SUPPORT



RICHARD S. BIEHL – DIRECTOR AND CHIEF OF POLICE

Rev. 04/20

POLICY STATEMENT

It is the policy of this agency to take action after officer-involved critical incidents to safeguard the mental health of all officers.

DEFINITIONS

Post-Traumatic Stress Disorder¹ - A psychiatric disorder that can occur in people who have experienced or witnessed a traumatic event such as a natural disaster, a serious accident, a terrorist act, war/combat, rape or other violent personal assault.

Acute Stress Disorder¹ - Occurs in reaction to a traumatic event, just as PTSD does, and the symptoms are similar. However, the symptoms occur between three days and one month after the event.

Officer-Involved Shooting Incident - An incident where a law enforcement officer fires his or her weapon in the course of his or her duties. This is not limited to causing serious bodily injury to an officer or other person. It can include firing the weapon accidentally, or missing the intended target during the shooting.

Critical Incident - An incident that is unusual, is violent, and involves perceived threat to, or actual loss of, human life. The incident is a significant emotional event that breaks through an individual's normal coping mechanisms and may cause extreme psychological distress.

Debriefings - In the context of this policy, a formal process that is conducted by a qualified mental health professional to address the psychological and emotional effects of the critical incident.

Agency Briefing - An informational administrative report on what happened during the critical incident.

Qualified Mental Health Professional (QMHP) - Any individual who is licensed as a mental health professional and has an in-depth understanding of the duties and responsibilities of law enforcement.

Peer Support Program - A formal group of individuals consisting of approved members who have undergone training in peer support methods.

Officer - In the context of this policy, an officer who discharged their firearm.

¹ =American Psychiatric Association, psychiatry.org, 2020

I. PURPOSE

The purpose of this policy is to provide guidelines that shall be uniformly applied following any officer-involved critical/shooting incident, in order to minimize the chance that officers will suffer from the negative emotional and psychological reactions that can occur after the use of deadly force in an on- or off-duty confrontation. This policy is designed to address the needs of the officer who discharged their firearm.

Law enforcement duties can expose officers to mentally painful and highly stressful situations that cannot be resolved through normal stress coping mechanisms. Unless adequately treated, these situations can cause disabling emotional and physical problems. Officer-involved shootings resulting in the death of or serious bodily injury to a citizen or a fellow officer may cause adverse reactions and behaviors in the officer. It is the responsibility of this law enforcement agency to provide officers with information on potential post-shooting trauma reactions and to guide and assist in their prevention.



II. PROCEDURES

Handling of Officers at Scene of Critical/Shooting Incident

- A. A supervisor shall be dispatched to the scene of the incident, and shall assume primary responsibility for the officer. Communicating emotional support and reassurance is paramount.
- B. The supervisor shall make appropriate arrangements for all necessary medical treatment.
- C. The officer should be offered food and water to satisfy their basic needs as soon as possible.
- D. Where possible, the supervisor shall briefly meet with the officer.
 1. Ensure that a brief Public Safety Statement is collected individually from the involved officer(s), covering only information necessary to focus initial police response and direct the preliminary investigation. This includes information on:
 - type of force used;
 - direction and approximate number of shots fired by officers and suspects;
 - location of injured persons;
 - description of at-large suspects and their direction of travel, time elapsed since the suspects were last seen, and any suspect weapons;
 - description and location of any known victims or witnesses;
 - description and location of any known evidence; and
 - any other information necessary to ensure officer and public safety and to assist in the apprehension of at-large suspects.
 2. The officer should be advised that a more detailed interview will be conducted at a later time.
 3. Any standard criminal or administrative investigations that will occur concerning the incident should be explained to and discussed with the officer.
 4. The officer should be advised that they may seek legal counsel or union representation.
 5. The officer should be advised not to discuss the incident with anyone except a personal or city attorney, department investigator, or QMHP until the conclusion of the preliminary investigation.
- E. The supervisor shall exchange the officer's duty weapon in a discreet manner and replace it with a similar weapon that the officer is qualified to use immediately, unless there is an objective basis for questioning the officer's fitness for duty.
- F. During any period where the officer is required to remain on the scene, but has no immediate duties to fulfill, they should be removed from the immediate vicinity to a quiet area. If the officer has an immediate need to talk about the shooting incident, they should be encouraged to do so with those that have legal, privileged confidentiality.
- G. The officer should notify their family by telephone that the incident has occurred as soon as reasonably possible, but should refrain from discussing details. Use of social media for notifications is discouraged.
- H. Where an officer is injured or deceased, a police department official and another member of the department, preferably an individual with personal knowledge of the officer and his or her family, such as a partner or close friend, shall personally notify the officer's family and arrange for their transportation to the hospital or other location as required.
- I. If an officer is transported to the hospital, ensure that a designated supervisor accompanies or meets them there. The designated supervisor will act as a liaison between the officer and the hospital.
- J. The department shall offer to assign a member of the peer support team to the officer's family for security, support, and management of media inquiries and visitors.
- K. At all times, when at the scene of the incident, the supervisor should handle the officer in a manner that acknowledges the stress caused by the incident and refrain from passing judgment regarding the shooting.



III. POST-INCIDENT PROCEDURES

- A. The officer will be placed on short-term Administrative Leave with full pay and benefits for a period of up to three work days, but shall remain available for any necessary administrative investigations. It is important that the officer and the public understand the leave period is not a disciplinary suspension. The Assistant Chief of Police may authorize Administrative Leave for up to 80 work hours if deemed necessary. Any leave beyond that period would be subject to the sick leave policy and contractual restrictions to personal leave.
- B. The officer shall be required to attend one initial and one follow up counseling session with a professional counselor provided by the agency's designated QMHP as soon as reasonably possible. After the QMHP meets with the officer, and with the officer's understanding, the QMHP shall complete a Post-Critical Incident Screening Form (Attachment #1) so the agency shall be advised of:
 - Whether it would be in the officer's best interest to have additional leave; and
 - the best continued course of counseling and intervention.
- C. Follow up counseling services should be made available to the officer. The initial follow-up should be face to face.
- D. This department strongly encourages the family of the officer to take advantage of available agency mental health/counseling services. It is recommended family/relationship joint counseling services be offered to the officer and their family or significant other whenever possible.
- E. As soon as reasonably possible, a department briefing concerning the incident should occur so that rumors are kept to a minimum. Department members are encouraged to demonstrate their concern for the officer.
- F. The officer should be advised that they are not permitted to speak with the media about the incident. The officer shall refer inquiries from the media to a designated department spokesperson, unless otherwise authorized to release a statement pertaining to the incident.

IV. DAILY STRESS RECOGNITION

- A. Physical, cognitive, emotional, and behavioral reactions or problems may not arise immediately, or the officer may attempt to hide his or her problems. Supervisors are responsible for monitoring the behaviors of unit members for any adverse reactions or symptoms.
- B. A supervisor may order an officer to seek assistance or counseling from a QMHP upon a reasonable belief that stress may be disrupting the officer's job performance.

V. TRAINING

- A. The Dayton Police Department will provide employees with training pertaining to post-critical incident/shooting reactions and behaviors and the uniform procedures contained in this policy on a periodic basis.
- B. Supervisors and administrators must be trained to identify post-shooting trauma reactions and behaviors.
- C. Supervisors are responsible for making available to their personnel information about the agency's peer support, chaplains, and mental health services.



PCISF	DAYTON POLICE DEPARTMENT Post Critical Incident Screening Form / Attachment #1 <u>To be completed by a Qualified Mental Health Provider</u>
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Employee Name: _____

Date / Time of Critical Incident: _____

Date / Time of Initial Evaluation: _____

Date / Time of Current Treatment Session: _____

Type of Treatment and Plan:
 (Post-Traumatic Stress Prevention, Crisis Intervention, Post-Officer Involved Shooting Screening, etc.):

Based on my evaluation of the above listed employee as a Qualified Mental Health Professional, the employee: (Check all that apply)

- Is unable to perform any duty full or restricted from _____ to _____
- The employee may not return to work until after further evaluation(s)
- The employee may return to work with no restrictions on _____
- Other:
- Other:

Signature of QMHP: _____

Printed name of QMHP: _____

Address: _____

City / State / Zip Code: _____

Phone Number: _____