

TEXOMA FIRST RESPONDERS SUPPORT TEAM

# Texoma First Responders Peer Support Policy Manual

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Est August 18, 2021



The purpose of this policy is to provide direction to the formation and implementation of Texoma First Responders Support Team (TFRST), to be accepted by the departments and utilized for the employees and family members of Denison Fire Rescue, Denison Police Department, Sherman Fire-Rescue, Sherman Police Department, Van Alstyne Fire Department, Whitesboro Fire Department, Air Evac, Texoma Medical Center and Dr. Starr Psychologist & Counselor.

## **Peer Support Team Mission:**

Our mission is to provide TFRST personnel, both sworn and non-sworn, psychological and emotional support through pre-incident education, spousal/family support, on-scene support and demobilization intervention, post-incident debriefing or one-on-one interaction.

The TFRST will be comprised of agency members who have been specially trained in peer support techniques and who work in conjunction with mental health professionals who specialize in providing support to emergency service personnel.

### **Goals**

- 1) To provide a system of trusted support that will aid employees in resolving situations affecting their personal and professional environments.
- 2) To foster the physical, emotional, and social health of employees.
- 3) To provide information about various aspects of peer support through educational materials and their resources.
- 4) To provide a liaison between the employee and the department to identify and assist with resources available to them.
- 5) To develop and implement a peer support training program.
- 6) To work in conjunction with the peer support teams of local and regional departments to promote cross-agency dissemination of training materials and opportunities and to establish working relationships with other public safety peer support teams.

# Peer Support Program

## Standard Operating Guidelines

### Purpose

The purpose of TFRST is to prevent or lessen the potential negative impact of stress upon employees by providing emotional support, information, and assistance.

The program will provide employees with psychological and emotional support through one-on-one discussions, pre-incident education, education on stress management, spousal/significant other support, on-scene support and demobilization intervention.

TFRST will be comprised of department members, of any rank or position, who have been specially trained in stress management, peer support, and crisis intervention techniques. Team members will work in conjunction with designated mental health professionals. TFRST is supported by Denison Fire Rescue, Denison Police Department, Sherman Fire-Rescue, Sherman Police Department, Van Alstyne Fire Department, Whitesboro Fire Department, Air Evac, Texoma Medical Center and Dr. Starr Psychologist & Counselor, as “Critical Incident Stress Management Service” and its members are considered “Emergency Response Team Members” as defined by TX Health and Safety Code Title 9, Subtitle B, Chapter 784 (See attached appendix A).

### Peer Support Team Members

TFRST will be made up of the following:

**Assistant Chief/Division Chief/Designated Officer.** Denison Fire Rescue, Denison Police Department, Sherman Fire-Rescue, Sherman Police Department, Van Alstyne Fire Department, Whitesboro Fire Department, Air Evac, Texoma Medical Center and Dr. Starr Psychologist & Counselor will have an Assistant Chief/Division Chief (or designee) dedicated to the TFRST program. The functions of this position are:

- 1) To oversee the program.
- 2) To develop, advise, and approve program policy.
- 3) To approve funding for program activities including training, travel and educational outreach.
- 4) To provide administrative support to the program.
- 5) To constitute a line of authority between the program, the clinical consultant, and the department.

- 6) Authorize membership into the program.
- 7) Authorize the activation of the team in large scale events.
- 8) Approve all requests for assistance from outside agencies.

**Clinical Consultant:** The clinical consultant manages all matters related to the psychological or clinical aspects of the program. The clinical consultant will be a licensed Health Care Professional in the State of Texas, affiliated with the departments. The functions of the clinical consultant are:

- 1) To consult and advise on all of the clinical aspects of the program.
- 2) To offer clinical support and guidance to the team leaders.
- 3) To assist in securing relevant training and continuing education materials for TFRST.
- 4) To assist in the development of policy and protocol.
- 5) To act as a liaison between TFRST and other mental health professionals supporting the team.
- 6) To supervise and conduct peer support activities, when necessary, under the direction of the department(s).

**Peer Support Team Leader:** A team leader is a senior member of TFRST. This position is not a promoted position and department rank does not define who is eligible for the role of TFRST Team Leader. There will be a team leader selected for Denison Fire Rescue, Denison Police Department, Sherman Fire-Rescue, Sherman Police Department, Van Alstyne Fire Department, Whitesboro Fire Department, Air Evac, Texoma Medical Center and Dr. Starr Psychologist & Counselor and any future department(s) that join the TFRST. The selection of the team leader(s) will be made by TFRST members, and the recommendation will be forwarded to the Clinical Consultant and the Assistant Chief(s) for approval. Team leaders will be chosen based on reputation, leadership skills and a willingness and desire to serve in this capacity. The functions of the team leader are:

- 1) To manage TFRST.
- 2) To assist the clinical consultant in deploying and implementing peer support activities.
- 3) To maintain records of team activities.
- 4) To facilitate recruitment of new members.
- 5) To assist the clinical consultant in disseminating educational material and developing training for the team.
- 6) To act as a Point of Contact (POC) for outside agencies requesting assistance with a critical incident or development of a peer support team.
- 7) To act as the POC for each department local association (firefighter association/Police Association) and to request their assistance with funding or resources as needed.
- 8) To act as a peer support team member in addition to these listed functions.

**Peer Support Team Member:** TFRST members are the main providers and resource for employees seeking assistance. Their functions are:

- 1) To provide crisis intervention and basic support for employees and their families.
- 2) To provide referral to a Mental Health Professional either through the Employee Assistance Program (EAP), available insurance providers, or other professional contacts following the process as defined in the Peer Support Policy Manual.
- 3) To triage and consult the clinical consultant in a crisis event and provide recommendations about what crisis intervention services are needed.
- 4) To assist in educating employees about peer support and psychological support services.
- 5) To assist in deploying and implementing peer support.

## Policy

- 1) TFRST Program will consist of trained members who will be compensated for their time. Approval for compensation must be made through the Assistant Chief(s), (or their designee) prior to an incident or training.
- 2) Before being cleared to assist in peer support operations, each member will complete the Peer Support Training and sign the Peer Support Agreement.
- 3) Peer Support is not a substitute for professional counseling. TFRST members are not trained mental health professionals and may not diagnose nor treat mental health conditions.
- 4) All TFRST activities and contacts are voluntary. Employees may choose to utilize or reject peer support.
- 5) Employee(s) failing to meet department(s) expectations, on a Performance Improvement Plan, or currently on administrative leave during an investigation will not participate in TFRST activities as a TFRST Member.

## Confidentiality

TFRST is a confidential program. It is of vital importance to the peer support team that a strong presence of trust is established and maintained among those who would seek our services. This requires understanding of our confidentiality policies by department(s) administration, the clinical consultant, and all TFRST members.

- 1) No records identifying employees who utilize the program will be maintained.
- 2) TFRST members shall not discuss information obtained while acting in a peer support capacity, without consent of the employee, with anyone other than the clinical

consultant, other mental health professionals, or other TFRST members for the purpose of mental health support unless otherwise required by law.

- 3) TFRST members shall not divulge shared information with other employees, family members, friends, supervisors or management, or the general public.
- 4) TFRST members shall not be found insubordinate or otherwise in violation of city and/or department policy for failure to release or share information about an employee under internal investigation, obtained as a TFRST member, acting in an official capacity, unless otherwise required by law.
- 5) Employees shall be advised that confidentiality will be maintained **except** as required in the following circumstances:
  - a. The employee discloses information that leads TFRST member to believe the employee is an imminent threat to themselves or others.
  - b. The employee discloses information about suspected or alleged child abuse or elder abuse.
  - c. The employee discloses information regarding legal issues that **impact employment**.
  - d. Any other instances required by law.
- 6) Peer support confidentiality is outlined in the Texas Health and Safety Code, Title 9, Subtitle B, Chapter 784. (See Appendix A).
- 7) Peer support confidentiality agreement is provided in *Appendix B*.

## Social Media

Due to the highly visible nature of social media, it is imperative that TFRST members maintain an image of leadership and confidentiality. Any breach, or perceived breach, of our ability to lead or remain confidential would be detrimental to the peer support mission. Therefore, TFRST members will adhere to the following rules regarding social media:

1. If TFRST is involved in an incident involving an employee(s), the entire TFRST will refrain from **any and all** social media regarding the incident.
2. If there is an incident involving any other public safety agency, TFRST members shall not engage in any social media regarding the incident for **24 hours** post official release.
3. TFRST members shall refrain from making negative or derogatory comments toward the department(s) or the TFRST on social media.
4. TFRST members shall abide by the City of Denison/Denison Fire Rescue/Denison Police Department, City of Sherman/Sherman Fire-Rescue/Sherman Police Department, City of Whitesboro/Whitesboro Fire Department, Van Alstyne Fire Department, Air Evac, Texoma Medical Center and Dr. Starr Psychologist & Counselor social media policies that are already in place.

## Recruitment and Selection

The addition of peer support team members will be done on an as needed basis and selections will be made from eligible candidates by current TFRST members.

Qualified individual(s):

- Any uniformed or non-uniformed employee in good standing with the department(s).
- Not working under a performance improvement plan.
- Not currently the subject of an internal investigation.
- Each respective agency's Assistant Chief/Division Chief (or designee) has the final approval if the member will be appointed to the team.

## **Training**

Training is paramount to the team's ability to effectively and with confidence interact with personnel seeking peer support.

1. All new members will attend the peer support classes, in accordance with the clinical consultant, before engaging in any TFRST activities.
2. Continuing education will be provided at annual recurrent training and quarterly QA/QI meetings. Team members are required to attend recurrent training each year to remain active. If they are unavailable during the scheduled recurrent training, they may meet with the clinical consultant individually to review the materials.

## **Peer Support Contact Guidelines**

- a. Contact by TFRST can never be forced on an individual.
  - a. No order will be given by a superior for an employee to contact TFRST. Suggestions may be made in good faith.
  - b. Contacting TFRST will never be a condition of a Performance Improvement Plan.
  - c. Contacting TFRST will never be a condition of disciplinary action.
- b. Interaction with a TFRST member in the peer support capacity requires expressed consent by the individual.
- c. TFRST members may initiate contact with an individual on good faith for high profile incidents or requests by a 3<sup>rd</sup> party.
  - a. Contact will only consist of providing an individual the means to contact TFRST if they desire to do so.
  - b. TFRST will not release any information about an unsolicited contact. All inquiries will be addressed by stating that an individual was given the means to contact peer support if they desired to do so.
- d. TFRST contact information will be made easily available to employees who:
  - a. Sustain an On-the-Job injury.
  - b. Request FMLA.
  - c. Request leave donation due to injury or illness.
  - d. Are involved in an internal investigation.

- e. Are placed on administrative leave.
- e. TFRST Members who feel an on-duty employee is a hazard to themselves or others will ***immediately*** contact the Assistant Chief/Division Chief, or their designee, to request the employee be removed from operational status.
- f. The Battalion Chief/Bureau Commander/Shift Commander (or designee) should consider activating TFRST for calls involving:
  - i. Traumatic events involving children.
  - ii. Mass casualty incidents.
  - iii. Significant incidents involving department members or immediate families.
  - iv. Any unusual event with a powerful impact.

The Battalion Chief/Bureau Commander/Shift Commander (or designee) will make the request to the Assistant Chief/Division Chief (or their designee). The Assistant Chief/Division Chief (or their designee) will be responsible for coordinating the response of the TFRST.



## APPENDIX A

### HEALTH AND SAFETY CODE

#### TITLE 9. SAFETY

#### SUBTITLE B. EMERGENCIES

#### CHAPTER 784. CRITICAL INCIDENT STRESS MANAGEMENT AND CRISIS

#### RESPONSE SERVICES

Sec. 784.001. DEFINITIONS. In this chapter:

(1) "Crisis response service" means consultation, risk assessment, referral, and on-site crisis intervention services provided by an emergency response team member to an emergency service provider affected by a crisis or disaster.

(2) "Critical incident stress" means the acute or cumulative psychological stress or trauma that an emergency service provider may experience in providing emergency services in response to a critical incident, including a crisis, disaster, or emergency. The stress or trauma is an unusually strong emotional, cognitive, or physical reaction that has the potential to interfere with normal functioning, including:

- (A) physical and emotional illness;
- (B) failure of usual coping mechanisms;
- (C) loss of interest in the job;
- (D) personality changes; and
- (E) loss of ability to function.

(3) "Critical incident stress management service" means a service providing a process of crisis intervention designed to assist an emergency service provider in coping with critical incident stress. The term includes consultation, counseling, debriefing, defusing, intervention services, case management services, prevention, and referral.

(4) "Emergency response team member" means an individual providing critical incident stress management services or crisis response services, or both, who is designated by an

appropriate state or local governmental unit to provide those services as a member of an organized team or in association with the governmental unit.

(5) "Emergency service provider" means an individual who provides emergency response services, including a law enforcement officer, firefighter, emergency medical services provider, dispatcher, or rescue service provider. Added by Acts 2011, 82nd Leg., R.S., Ch. 651 (S.B. 1065), Sec. 1, eff. September 1, 2011.

Sec. 784.002. CLOSED MEETINGS. (a) Except as provided by subsection (b) and notwithstanding Chapter 551, Government Code, or any other law, a meeting in which critical incident stress management services or crisis response services are provided to an emergency service provider:

(1) is closed to the general public; and

(2) may be closed to any individual who was not directly involved in the critical incident or crisis.

(b) Subsection (a) does not apply if:

(1) the emergency service provider or the legal representative of the provider expressly agrees that the meeting may be open to the general public or to certain individuals; or

(2) the emergency service provider is deceased.

Added by Acts 2011, 82nd Leg., R.S., Ch. 651 (S.B. 1065), Sec. 1, eff. September 1, 2011.

Sec. 784.003. CONFIDENTIALITY. (a) Except as otherwise provided by this section:

(1) a communication made by an emergency service provider to an emergency response team member while the provider receives critical incident stress management services or crisis response services is confidential and may not be disclosed in a civil, criminal, or administrative proceeding; and

(2) a record kept by an emergency response team member relating to the provision of critical incident stress management services or crisis response services to an emergency service provider by the team is confidential and is not subject to subpoena, discovery, or introduction into evidence in a civil, criminal, or administrative proceeding.

(b) A court in a civil or criminal case or the decision-making entity in an administrative proceeding may allow disclosure of a communication or record described by Subsection (a) 2 if the court or entity finds that the benefit of allowing disclosure of the communication or record is more important than protecting the privacy of the individual.

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(c) A communication or record described by Subsection (a) is not confidential if:

(1) the emergency response team member reasonably needs to make an appropriate referral of the emergency service provider to or consult about the provider with another member of the team or an appropriate professional associated with the team;

(2) the communication conveys information that the emergency service provider is or appears to be an imminent threat to the provider or anyone else;

(3) the communication conveys information relating to a past, present, or future criminal act that does not directly relate to the critical incident or crisis;

(4) the emergency service provider or the legal representative of the provider expressly agrees that the communication or record is not confidential; or

(5) the emergency service provider is deceased.

(d) A communication or record described by Subsection (a) is not confidential to the extent that it conveys information concerning the services and care provided to or withheld by the emergency service provider to an individual injured in the critical incident or during the crisis.

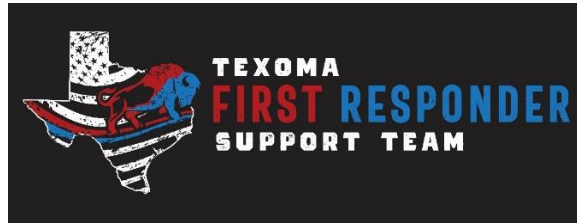
Added by Acts 2011, 82nd Leg., R.S., Ch. 651 (S.B. 1065), Sec. 1, eff. September 1, 2011.

Sec. 784.004. LIMITATION ON LIABILITY. (a) Except as provided by Subsection (b), an emergency response team or an emergency response team member providing critical incident stress management services or crisis response services is not liable for damages, including personal injury, wrongful death, property damage, or other loss related to the team's or member's act, error, or omission in the performance of the services, unless the act, error, or omission constitutes wanton, willful, or intentional misconduct.

(b) Subsection (a) limits liability for damages in any civil 3 action, other than an action under Chapter 74, Civil Practice and Remedies Code.

Added by Acts 2011, 82nd Leg., R.S., Ch. 651 (S.B. 1065), Sec. 1, eff. September 1, 2011.

## APPENDIX B



### Confidentiality Agreement for Texoma First Responders Peer Support Groups

Texoma First Responders Support Team (TFRST) is a confidential program. It is of vital importance to the peer support team that a strong presence of trust is established and maintained among those who would seek our services. This requires understanding of our confidentiality policies by department(s) administration, the clinical consultant, and all TFRST members.

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- 3) TFRST members ***shall not*** divulge shared information with other employees, family members, friends, supervisors or management, or the general public.
- 4) TFRST members ***shall not*** be found insubordinate or otherwise in violation of city and/or department policy for failure to release or share information about an employee under internal investigation, obtained as a TFRST member, acting in an official capacity, unless otherwise required by law.
- 5) Employees shall be advised that confidentiality will be maintained ***except*** as required in the following circumstances:
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  - b. The employee discloses information about suspected or alleged child abuse or elder abuse.
  - c. The employee discloses information regarding legal issues that impact employment.
  - d. Any other instances required by law.
- 6) Peer support confidentiality is outlined in the Texas Health and Safety Code, Title 9, Subtitle B, Chapter 784. (Copy available in policy manual).

Name (printed) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

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## REVISION HISTORY

**Directions:**

Any revisions to this manual will be identified in the footer and the “APPROVED REVISION HISTORY” of this document.

**APPROVED REVISION HISTORY**

Original Document: 10/16/2021

Approved Revision 6/12/2023